

# Family Readiness Group Monthly Report

Unit: \_\_\_\_\_ Date: \_\_\_\_\_  
(Due the end of each month)

Copies furnished to:

\_\_\_ Unit Commander                      \_\_\_ Battalion FRG Coordinator<sup>SFP form</sup>  
\_\_\_ State Family Readiness Office    \_\_\_ Other \_\_\_\_\_

## **FRG Meeting Report**

Meeting held: where \_\_\_\_\_ when \_\_\_\_\_ No. present \_\_\_\_\_  
( ) Copies of minutes attached

## **Number of Contacts:**

New Spouses \_\_\_\_\_ New Family Members \_\_\_\_\_ Other \_\_\_\_\_

## **Volunteers/Hours Reports**

Total Number of Volunteers _____	Total Number of Hours _____
Family Members _____	Family Members _____
Military Members _____	Military Members _____
Youth _____	Youth _____

## **Number of Activities**

	Type
Meetings _____	_____
Fundraisers _____	_____
Training _____	_____
Family _____	_____
Youth _____	_____
Other _____	_____

## **Financial Report**

Beginning Balance	_____
Income (amount & sources)	_____
	_____
	_____
Expenses (amounts & sources)	_____
	_____
	_____
Ending Balance	_____

\_\_\_\_\_  
FRG Leader Signature