

Assistant Council Commissioner Report

Trapper Trails Council BSA



Submit this monthly report to the Council Commissioner giving an account of your commissioner service actions during the past 30 days.

Name _____ Date _____

Position _____ Contact Phone _____

Commissioner Assignment Category: Administrative ___ Roundtable ___ Field Service ___ Other ___

Assignment/Type/District/Location : _____

Describe the commissioner service (visit, meeting, event or actions) that you did in the past month:

Describe any recommendations you have from that commissioner service:

What part of the Council Commissioner Plan have you fulfilled with these actions:

Other details you wish to share:
