

Monthly DEC/EC Report

Jurisdiction: _____	Month: _____	Year _____
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AMATEUR RADIO EMERGENCY SERVICE

Total number of ARES members: _____ Change since last month: _____(+,-, or same)

Local Net Name: _____ Total sessions _____

NTS liaison is maintained with the _____ Net

Number of drills, tests and training sessions this month: _____ Person hours _____

Number of public service events this month: _____ Person hours _____

Number of emergency operations this month: _____ Person hours _____

Total number of ARES operations this month: _____ Total Person hours _____

Comments:

Signature: _____ Title: (EC or DEC) _____ Call sign: _____

Please send to your SEC or DEC as appropriate by 2nd of the month

FSD-212 (1-04)