MD-24

**PROJECT AND ACTIVITIES REPORT**

# Attach to Monthly Membership Report sent to DG, VDG, Region and Zone Chairs

## PLEASE TYPE OR PRINT

#### CLUB NAME: MONTH/YEAR ATTENDANCE PER CENT:

### PROGRAMS

#### TITLE DATE PRESENTER

### FUND RAISERS

#### TYPE DATE AMOUNT RAISED

######

### PROJECTS AND/OR SERVICES PROVIDED

#### PROJECT and/or ACTIVITY DATE No. OF MEMBERS MAN HOURS COST RESULTS

### CASH DONATIONS

#### RECIPIENT DATE AMOUNT

### OTHER DONATIONS

**EYEGLASSES: NUMBER COST EYE EXAMS: NUMBER COST**

**HEARING EXAMS: NUMBER COST HEARING AIDS: NUMBER COST**

##### COLLECTIONS

**USED EYEGLASSES: NUMBER USED HEARING AIDS: NUMBER**

### ADMINISTRATIVE

**DATE DUES PAID: INTERNATIONAL: STATE:**

(Due by July 31 and January 31) (Due by December 31)

### INDICATE DATE AND THOSE ATTENDING

 **DATE PRESIDENT SECRETARY VP OTHER**

**ZONE MEETING:**

**FALL CONFERENCE:**

**MIDWINTER FUNCTION:**

**STATE CONVENTION:**

**REGION MEETING:**

**OFFICERS TRAINING:**

### OTHER

###### MD24-MAR 05/24/99 CLUB SECRETARY