


CLUB COMMITTEE **CHAIRPERSON REPORT**

Kiwanis Club of Abilene, Division 35, # K00403

Report of Committee _____ Month _____ Year _____

of Committee Members _____

Meetings during month _____

Attending _____

ACTIVITIES DURING MONTH

Name of Activity: _____

(Use additional information section to list additional activities for month.)

Project Complete:	
Service Hours Worked:	
# Kiwanians Involved:	
# Children Benefitted:	
# Adults Benefitted:	
Money Spent this Month:	

Additional Information: (share successes or activities of the committee this month)

Date submitted to Club Secretary _____

Chairperson _____ (please print)

Note to Chairperson: Completed report can be faxed to 325-627-7352 or mailed to Kiwanis Club of Abilene, 473 Cypress Street, Suite 107, Abilene TX 79601

Thank you for your prompt attention to this important reporting detail.

Questions? Please call 627-7134 or email fdodson@ffin.com.