



## GFWC-SC

# STATE STATISTICAL & NARRATIVE COVER ENTRY FORM

Reporting Period: January 1 ~ December 31

Due: February 1

Year: \_\_\_\_\_

CLUB NAME			
Club Category	<input type="checkbox"/> General I	<input type="checkbox"/> General II	<input type="checkbox"/> General III <input type="checkbox"/> Junior <input type="checkbox"/> Juniette
Number of Paid Members as of April 30			
Member Reporting	Email		
Mailing Address			
City	Zip	Phone	
Report Type	<input type="checkbox"/> Statistics Only	<input type="checkbox"/> Statistics & Narrative	<input type="checkbox"/> Stats, Narrative & Addenda

Name of SPECIAL PROGRAM, COMMUNITY SERVICE PROGRAM or ADVANCEMENT PLAN:

<u>CSP or SPECIAL PROGRAM</u>	<u>ADVANCEMENT PLAN</u>
Number of Projects _____	Number of Projects _____
Volunteer Hours _____	Volunteer Hours _____
In-Kind Donations _____	In-Kind Donations _____
Dollars Donated _____	Dollars Donated _____
	Dollars Raised* <sub>fundraising</sub> _____

Name of GFWC AFFILIATE ORGANIZATION *(ONLY project totals for GFWC Affiliate Organizations are reported below!)*:

Number of Projects	_____
Volunteer Hours	_____
Dollars Raised and/or Donated	_____

Include your narrative and addenda on a separate sheet(s) and email with this form.