



Quarterly Chapter Report

1. This form must be filled out even if your chapter does not qualify for quarterly funding
2. Mail form to fraternal services, Royal Neighbors of America, 230 16th Street, Rock Island, IL 61201
3. Return it by:

First quarter (Jan./Feb./Mar.)Due as soon as possible
 Second quarter (Apr./May/June)Due by July 15
 Third quarter (July/Aug./Sept.).....Due by Oct. 15
 Fourth quarter (Oct./Nov./Dec.)Due by Jan. 15

Reporting Period: 1st Quarter 2nd Quarter 3rd Quarter 4th Quarter

Adult Youth Chapter No. _____ City _____ State _____

Name and title of officer completing this report _____

(Please print)

Daytime phone no. (_____) _____ E-mail address _____

Signature _____ Date _____

Meetings:

| Month of Quarter | Date <small>Example: Jan. 10, 2007</small> | No. of Attendees <small>Example: 8 Adults and 2 Youths</small> | Length of Meeting <small>Example: 1 Hour</small> |
|------------------|---|---|---|
| Month 1 | | | |
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| Month 2 | | | |
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| | | | |
| | | | |
| Month 3 | | | |
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Community Service Projects

| Month of Quarter | Date | Total No. of Volunteers | <p style="text-align: center;">Total No. of Volunteer Hours</p> <p>Time actually spent performing a service to others, include preparation and travel time.</p> <p>20 volunteers x 3 hrs. each = 60 vol. hrs.</p> | <p>Project Description – tell us what you did (If reporting a fundraiser, please report the total amount raised and indicate if the project was for matching funds or another type fund-raiser.)</p> <p>Examples: Matching funds – Hosted a matching funds project for the local Hospice Center. Raised \$300 from spaghetti dinner and Royal Neighbors matched with \$300. Other type fundraiser – Held a bake sale and raised \$75. Donated entire amount to the Miller family who recently lost everything in a fire. Service project – Volunteered to work at the local blood bank. Three members helped make telephone calls, and one member served juice and cookies to the donors.</p> |
|------------------|------|-------------------------|--|---|
| Month 1 | | | | |
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| Month 2 | | | | |
| | | | | |
| | | | | |
| Month 3 | | | | |
| | | | | |
| | | | | |

Events

| Month of Quarter | Date | Total No. of Attendees | Total No. of Volunteers | Total No. of Volunteer Hours Include preparation, clean-up, and travel time. 20 volunteers x 3 hrs. each = 60 vol. hrs. | Project Description – tell us what you did Examples: A representative from the local fabric store gave a demonstration on how to make fleece blankets, and we enjoyed refreshments after the presentation. We invited all Royal Neighbors members and the public to a potluck dinner sponsored by our chapter. We invited all Royal Neighbors members and the public to join us for an informational luncheon. A nurse from the local health clinic talked about high blood pressure and how to control/prevent it. |
|------------------|------|------------------------|-------------------------|--|---|
| Month 1 | | | | | |
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| Month 2 | | | | | |
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| Month 3 | | | | | |
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Report of additional fraternal, charitable, and benevolent chapter activities during the applicable quarter

Fraternal Support

Section 1: How many hours did members spend **attending** meetings, events, activities, and community service projects?

Section 2: In this section report total dollars spent by the chapter during the quarter:

To maintain and operate the chapter (hall rent, postage, utilities, chapter supplies, etc.) \$

For expenses related to sponsoring/hosting chapter functions including advertisement, entertainment, refreshments, decorations, prizes, etc.:

| | |
|--|----|
| Meetings | \$ |
| Community Service Projects (excluding fund-raising activities) | \$ |
| Events | \$ |
| Social Activities..... | \$ |
| Conventions | \$ |
| Other _____ | \$ |
| (Description) | |

Community Service

Section 3: Dollar value of items donated by the chapter during the quarter:

| | |
|----------------------------------|----|
| Food..... | \$ |
| Clothing | \$ |
| Other _____ | \$ |
| (Books, dishes, furniture, etc.) | |

Section 4: Acts of community service performed by members in the name of Royal Neighbors:
Only report information not included under community service projects on page 2.

Total number of visits to the sick, bereaved, disabled, etc.

Total number of hours spent helping the sick, bereaved, disabled, etc.
(5 members x 3 hours each = 15 hours)

Section 5: Total donations made during the quarter with chapter funds:

| | |
|---|----|
| Scholarships (Royal Neighbors & Others) | \$ |
| Dogs for the Deaf | \$ |
| Direct Aid to victims of disasters, illness, etc..... | \$ |
| Other _____ | \$ |
| (Welfare organizations, civic activities, homes, hospitals, schools, libraries, etc.) | |

Section 6: Total dollars spent by the chapter during the quarter for:

| | |
|---|----|
| Fund-raising activities, including matching funds..... | \$ |
| Gifts, flowers, etc. in cases of sickness, accident, death, etc. | \$ |
| Other _____ | \$ |
| (To assist the disabled, those less fortunate, etc.) | |