



Club Committee Chairperson Report

Committee: _____ Date: _____

Continuing Activities

Name of Activity: _____ Hours completed: _____

Activity Evaluation/Updates:

Name of Activity: _____ Hours completed: _____

Activity Evaluation/Updates:

New Activities

Name of Activity: _____

Finances: _____ Projected work hours: _____

Description of Activity:

Assistance needed from other committees/officers:

Name of Activity: _____

Finances: _____ Projected work hours: _____

Description of Activity:

Assistance needed from other committees/officers:

Additional Notes: _____

Chairperson Signature: _____ Date Submitted: _____

a Kiwanis-family member
keyclub.org