



## ANNUAL CHAPTER REPORT FORM

Date: \_\_\_\_\_

Send To: Your State Easterseals Chair by April 15.  
 (Include Total Contributions from April 1<sup>st</sup> through March 31<sup>st</sup>)

**NOTE:** Your State Easterseals Chair Year-end Report is due to the IC Jr. Easterseals Chair by May 15th

Chapter Name \_\_\_\_\_ Number \_\_\_\_\_ City \_\_\_\_\_

Chapter Easterseals or Philanthropic Chair \_\_\_\_\_  
 Phone # or email \_\_\_\_\_

Number of members including pledges as of March 31<sup>st</sup> \_\_\_\_\_

You may use the **ESA Foundation Turn-Around Fund**. Donations are sent to your State Easterseals Office or National Easterseals, 230 W Monroe, Suite 1800 Chicago, IL 60606.

<u>Project</u>	<b>Donated Monies</b>	<b>Donated Goods \$</b>	<b>Mileage</b>	<b>IRS Rate</b>	<b>Donated Hours</b>
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### TOTALS

**Refer to ESA International Philanthropic-Service Guidelines**

Please round off miles and hours to the full mile/hour (3.5 should be 4) *IRS Rate will round off total only.*

Please do not include Cartridge credit on this report; your State Chairman will consider this for the State Awards

Please note if this includes a state project such as contributions to a drawing (to avoid duplicative reporting)

Monies used to purchase Tulips, dinner/lunch tickets etc should be placed under "donated goods"

If you had a successful project please share

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