

DATE: \_\_\_\_\_

C.B.A./ABATE QUARTERLY CHAPTER & DISTRICT ACTIVITY SUMMARY

CHAPTER/DISTRICT NAME: \_\_\_\_\_

SECRETARY NAME: \_\_\_\_\_

TREASURER NAME: \_\_\_\_\_

# Of members on your books (to be checked against Membership Services records) \_\_\_\_\_

**Financial Report:** List the balances in your general account, and any and all other accounts, investments, savings, etc. having to do with money held FOR and BY your chapter. (example: Downed rider funds, building funds, event accounts, etc.) Please indicate the name of the account along with the balance. Also attach a copy of all monthly statements of this quarter for these accounts to this report form.

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**Chapter Activities:** Please give a brief description of each event or fundraiser, indicating profit or no profit. If profit, please provide check # and date the 20% assessment, where applicable, was sent to the state treasurer. (within 90 days – Article VI, Section 5-d)

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**UPCOMING EVENTS/Fundraisers:** List dates/times scheduled and what the event is. Please indicate if information was sent to Information Services in order to help promote your event.

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**CHAPTER & COMMUNICATION INFORMATION:** List for first quarter, and for any changes: All officer names and phone numbers AND email addresses. List where chapter meets and when. Also Chapter PO Box if changed.

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