**QUARTERLY CLUB VOLUNTEER COMMUNITY SUPPORT REPORT FORM – Page 1**

Check quarter being submitted:

|  |  |
| --- | --- |
| **🞎** March thru May – Submit in June | **🞎** September thru November – Submit in January |
| **🞎** June thru August – Submit in September | **🞎** December thru February – Submit in March |

**STATE PROJECTS** - Please include amount or number of items completed or donated, include cash donations.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **PROJECT** | **NAME OF ITEM** | **# OF ITEMS** | **$ VALUE OF ITEM** | **CASH DONATION** | **Hours Spent** |
|  | Indiana Donor Network Shawls |  |  |  |  |  |
|  | Riley Children’s Hospital and Cheer Guild |  |  |  |  |  |
|  | Ronald McDonald Houses |  |  |  |  |  |
|  | Coins for Friendship (Donations to ACWW project) |  |  |  |  |  |
|  | Nickels for Leadership |  |  |  |  |  |
|  | IEHA Cancer Research Endowment |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | **Total** |  |  |  |  |  |

To be completed by the Club VCS chair. Complete quarterly and submitted to the County VCS Chair by **March 1**. County VCS Chair should compile all reports and send to the Past State President by **April 1**.

**COUNTY PROJECTS** – Please include amount or number of items complete or donated, include cash donations **Page 2**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **PROJECT** | **NAME OF ITEM** | **# OF ITEMS** | **$VALUE OF ITEM** | **CASH DONATIONS** | **Hours Spent** |
| C1 |  |  |  |  |  |  |
| C2 |  |  |  |  |  |  |
| C3 |  |  |  |  |  |  |
| C4 |  |  |  |  |  |  |
| C5 |  |  |  |  |  |  |
| C6 |  |  |  |  |  |  |
| C7 |  |  |  |  |  |  |
| C8 |  |  |  |  |  |  |
| C9 |  |  |  |  |  |  |
|  | **TOTAL** |  |  |  |  |  |

**LOCAL CLUB PROJECTS** – Please include amount or number of items complete or donated, include cash donations

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **PROJECT** | **NAME OF ITEM** | **# OF ITEMS** | **$VALUE OF ITEM** | **CASH DONATION** | **Hours Spent** |
| L1 |  |  |  |  |  |  |
| L2 |  |  |  |  |  |  |
| L3 |  |  |  |  |  |  |
| L4 |  |  |  |  |  |  |
| L5 |  |  |  |  |  |  |
| L6 |  |  |  |  |  |  |
| L7 |  |  |  |  |  |  |
| L8 |  |  |  |  |  |  |
| L9 |  |  |  |  |  |  |
|  | **TOTAL** |  |  |  |  |  |

**CLUB VOLUNTEER COMMUNITY SUPPORT CHAIRPERSON INFORMATION**

|  |
| --- |
| Name |
| Address |
| Phone |
| Email |