

WOMEN OF THE MOOSE  
 155 SOUTH INTERNATIONAL DR  
 MOOSEHEART, ILLINOIS 60539-1100

CHAPTER NUMBER: \_\_\_\_\_  
 CHAPTER NAME: \_\_\_\_\_  
 STATE/PROVINCE: \_\_\_\_\_

**FORM 166**  
**2021-2022 Chapter Year**

Committee form for **Fraternal Activities - December** FUND-RAISING AND SPECIAL PROJECTS. Each Chairman prepares and reads report at first Chapter Meeting after Fund-Raising Project is held. When Committee has held more than one Fund-Raising Project, complete this form covering all projects. Give to Senior Regent after the meeting.

**SEND THIS FORM TO WOMEN OF THE MOOSE HEADQUARTERS  
 AFTER THE FUND-RAISING PROJECT IS COMPLETE.**

<b>Committee Name</b>	<u><b>Fraternal Activities - December</b></u>
<b>Chairman's Name</b>	_____
<b>Number of Committee meetings held</b>	_____
<b>Committee Fund-Raising Project was</b>	_____
<b>Date held</b>	_____
<b>Place held</b>	_____
<b>Number of Committee members present at Fund-Raising Project</b>	_____

<b>TOTAL PROCEEDS COLLECTED \$</b> _____	<b>LESS EXPENSES \$</b> _____	<b>NET PROFIT \$</b> _____
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Indicate amount approved for special project of Committee for Mooseheart and Moosehaven and any other civic or Chapter project on lines indicated below.

<b><i>Proceeds will be used for:</i></b>	<b><i>Amount approved:</i></b>
_____	\$ _____
_____	\$ _____
_____	\$ _____

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Committee Chairman's Signature)

\_\_\_\_\_  
 (Treasurer's Signature)

\_\_\_\_\_  
 (Senior Regent's Signature)

\_\_\_\_\_  
 (PRINT Treasurer's Name) (Phone #)

\_\_\_\_\_  
 (PRINT Senior Regent's Name) (Phone #)