

IMPORTANT! This information must be completed for credit!

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

CHAPTER NUMBER: _____
 CHAPTER NAME: _____
 STATE/PROVINCE: _____

**FORM 166
 2023-2024 Chapter Year**

Committee form for **Higher Degrees - Star** FUNDRAISING AND SPECIAL PROJECTS. Each Chairman prepares and reads report at first Chapter Meeting after Fundraising Project is held. When Committee has held more than one Fundraising 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 FUNDRAISING PROJECT IS COMPLETE.**

Committee Name	<u>Higher Degrees - Star</u>
Chairman's Name	_____
Number of Committee meetings held	_____
Committee Fundraising Project was	_____
Date held	_____
Place held	_____
Number of Committee members present at Fundraising Project	_____

TOTAL PROCEEDS	LESS	NET
COLLECTED \$ _____	EXPENSES \$ _____	PROFIT \$ _____

Indicate amount approved for special project of Committee for Mooseheart and Moosehaven and any other civic or Chapter project on lines indicated below.

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

 (Date)

 (Committee Chairman's Signature)

 (Treasurer's Signature)

 (Senior Regent's Signature)

 (PRINT Treasurer's Name) (Phone #)

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