	IMPORTANT! T	his 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 2022-2023 Chapter Year

Committee form for **Membership - September** 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	Membership - September			
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 COLLECTED \$ EXPENSES	NET 5 \$ PROFIT \$			
Indicate amount approved for special project of Cocivic or Chapter project on lines indicated below.	ommittee for Mooseheart and Moosehaven and any other			
Proceeds will be used for:	Amount approved:			
	<b>\$</b>			
	\$			
	\$			
(Date)	(Committee Chairman's Signature)			
(Treasurer's Signature)	(Senior Regent's Signature)			
(PRINT Treasurer's Name) (Phone #)	(PRINT Senior Regent's Name) (Phone #)			