



**ANNUAL CHAPTER REPORT FORM  
To be submitted to  
STATE EASTER SEALS CHAIR**

**Date:** \_\_\_\_\_

**Send To: Your State Easter Seals Chair by April 15.**

(Include Total Contributions from April 1<sup>st</sup> through March 31<sup>st</sup>)

**NOTE:** Your State Easter Seals Chair Yearend Report is due to the IC Jr. Easter Seals Chair by May 15<sup>th</sup>

Chapter Name \_\_\_\_\_ Number \_\_\_\_\_ City \_\_\_\_\_

Chapter Easter Seals or Philanthropic Chair \_\_\_\_\_ Phone # or email \_\_\_\_\_

Number of members including pledges as of March 31<sup>st</sup> \_\_\_\_\_

You may use the **ESA Foundation Turn-Around Fund**. Donations are sent to your State Easter Seals Office or National Easter Seals, 230 W Monroe, Suite 1800 Chicago, IL 60606, and indicate what the funds are for.

<u>Project</u>	<u>Donated Monies</u>	<u>Donated Goods \$\$</u>	<u>Mileage x .445</u>	<u>Donated Hours</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
<b>TOTALS</b>	<b>\$_____</b>	<b>\$_____</b>	<b>\$_____</b>	<b>Hours_____</b>

**Refer to ESA International Philanthropic-Service Guidelines revised April 2003**  
 Please round off miles and hours to the full mile/hour (3.5 should be 4)  
 Please do not include Cartridge credit on this report; your State Chairman will consider this for the State Awards  
 Please note if this includes a state project such as contributions to a drawing (to avoid duplicative reporting)  
 Monies used to purchase Tulips, dinner/lunch tickets etc should be placed under "donated goods"

If you had a successful project please share  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_