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 114 2013 - 2014

Report of Green Cap/Ways and Means Committee Activity Night prepared by Chairman.

Read at Second meeting of the month. Give to Senior Regent after the meeting.

Project assigned to Committee: **Moosehaven Pier Renewal Project** 

## After the Chapter Meeting in Anytime during 4th Quarter Send form and checks to: Women of the Moose Headquarters. DO NOT SEND IN BEFORE THIS DATE.

Committee Name	Green Cap/Ways and Means	
Chairman's Name		
Date of Chapter Activity Night		
Number of New members present at Chapter Activity Night		
Number of Candidates balloted upon/enrolled during the month		
Number of committee members present at Chapter Activity Night		
Chapter check(s) for:		
Women of the Moose Scholarship and Maintenance Fund	Check No	Amt. <u>\$</u>
Project assigned to Committee	Check No.	Amt. <u>\$</u>
Endowment Fund (collected and deposited since last report)	Check No	Amt. <u>\$</u>
On the back of this form, please explain, in detail, program	n held (guest speaker, g	ame or skit and refreshments).
Attach a copy of skit and/or de	etailed description of gar	ne.
Attach photos (will not be returned) of activity, meeting, guest posted on WOTM webpage and/or shown at	•	• •
<b>Community Service for the month (or since your</b> Cash Donations to non-Moose organizations Hours Volunteered Miles driven	\$	

(Date)

(Committee Chairman)

(Recorder)

(Senior Regent)

(PRINT Recorder's Name)

(Phone #)

(PRINT Senior Regent's Name)

(Phone #)

