**DO NOT SEND ANY FORM TO GFWC HEADQUARTERS (2024 or 2025 CLUB STATISTICS ONLY, circle one) Part 2.**

**Send this form to STATE PRESIDENT & STATE VICE-PRESIDENT by FEBRUARY 1ST.**

**Club Statistical Form ~ Community Service Projects (CSP) & GFWC Advancement Area**

**Affiliate Organization Projects ONLY**

Full Name of Club:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Members:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person submitting report:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: The State Vice-President will provide names of the GFWC Affiliate Organizations before reporting time. Write the name of the GFWC Affiliate Organization that you completed your club project with under the specific program area you think best represents your project.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | number of projects | volunteer hours | dollars donated | in-kind donations | dollars spent | dollars raised |
| GFWC Signature Project |  |  |  |  |  |  |
| GFWC Juniors Project |  |  |  |  |  |  |
| Arts & Culture CSP |  |  |  |  |  |  |
| Civic Engagement & Outreach CSP |  |  |  |  |  |  |
| Environment CSP |  |  |  |  |  |  |
| Education & Libraries CSP |  |  |  |  |  |  |
| Health & Wellness CSP |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Fundraising & Development  **FLOWER POWER**  **TERRI LYNN** |  |  |  |  |  |  |