



## VOLUNTEER ACTIVITY REPORT

### *PERFORMED IN THE NAME OF YOUR WOMAN'S LIFE CHAPTER*

As a fraternal benefit society, Woman's Life keeps track of the volunteer activity performed in the name of Woman's Life by chapter members. The collection and documentation of this information is an important part of justifying the tax exempt status of all fraternal benefit societies. Woman's Life uses this information for reporting purposes to various entities.

Please use this form to report your involvement to your chapter treasurer.

1. Hours devoted to initiating, organizing, promoting/advertising, and conducting your Woman's Life Chapter Fundraisers \_\_\_\_\_

2. Hours devoted to initiating, organizing, promoting/advertising, and conducting your Woman's Life Chapter Volunteer Service Projects \_\_\_\_\_

Clothing donations  
 Approximate value \$ \_\_\_\_\_ Recipient \_\_\_\_\_

Food donations  
 Approximate value \$ \_\_\_\_\_ Recipient \_\_\_\_\_

Book donations  
 Approximate value \$ \_\_\_\_\_ Recipient \_\_\_\_\_

Packages to Military Service Personnel  
 Approximate value \$ \_\_\_\_\_ Recipient \_\_\_\_\_

Packages for Children  
 Approximate value \$ \_\_\_\_\_ Recipient \_\_\_\_\_

Other  
 Item \_\_\_\_\_  
 Approximate value \$ \_\_\_\_\_ Recipient \_\_\_\_\_

3. Hours devoted to planning your Woman's Life Chapter Social Events \_\_\_\_\_

4. Hours helping members and hours of community service in the name of Woman's Life (Transportation, Errands, Volunteer Work, Etc.) \_\_\_\_\_

5. Number of visits to sick, bereaved, or disabled in the name of your Woman's Life Chapter \_\_\_\_\_

\_\_\_\_\_  
 Signature of Member

\_\_\_\_\_  
 Date

*For chapter treasurer's use only ~ do not send to Home Office*