

CHAPTER REPORTING FORM

AHEPA FAMILY GOLDEN GATE DISTRICT #21 Convention No. _____ Year _____

Chapter Name & Number : _____

MEMBERSHIP STATUS	Last Year	This Year
Members paid as of		
Life Members		
Reinstated		
New Members Initiated		
Per Capita paid to District 21	\$	\$
Per Capita paid to National Headquarters	\$	\$
Members who passed away during the last year:		
PAST YEAR ACTIVITIES		
FUTURE ACTIVITIES		
Donations to District 21 Scholarship Fund:	\$	
Total Chapter Scholarships: \$	Number of Chapter Scholarships:	
Would your Chapter like to host the next Winter Conference?	YES:	NO:
GOOD OF THE ORDER		
Chapter President or Secretary Signature		Date