2016 LOCAL GROUP PROJECT FORM

Local Chapter Name:	Area:
Report submitted by:	Phone:
Address:	City/St/Zip:
Email:	
Please give a concise description in <u>no more</u> than 400 words, of ONE community service project your group performs. List the specific types of things your members do for this project. If the project is an ongoing one, describe changes or improvements that have been made.	

Please send this report to your Area Community Service Chairperson by January 15, 2017. Thank you.