

CHAPTER PRESIDENT'S MONTHLY REPORT

CHAPTER: _____ DATE: _____

Current Month's Meeting

1. Monthly Meeting Date: _____ Location: _____
2. Principal Speaker: _____
3. Title: _____
4. Speaker's Firm: _____
5. Address: _____
6. Expense Reimbursement: Yes _____ No _____ Honorarium \$ _____
7. Subject or Speech Title: _____
8. Subject: Poor Fair Good Superior
9. Speaker: Poor Fair Good Superior
10. Attendance # _____
11. Special Highlights: Recognition of new members, awards and recipients: _____

12. Describe other meetings held during the month: Date(s): _____
Reason: _____
13. Next Month Meeting Date: _____ Time: _____
14. Location: _____ Speaker: _____
15. Enclose: Board of Directors Minutes, News Releases, News Clippings, Deceased Member Names

Chapter President's Signature: _____

Please return this form to the Society at
wvscpa@wvscpa.org each month.

If there is no meeting held in that month,
please indicate this on item 1 of the form.