

PHILANTHROPY EVENT REPORT

Please keep a copy of this report with the Director of Philanthropy's notebook, so that the Chapter can keep documentation of the philanthropic work completed.

Date:

Chapter/Colony/Alumni Chapter:

Director of Philanthropy:

Phone:

Email:

Charitable Organization:

Address:

Phone:

Please provide a description of the philanthropy activity that was done: *(Please attach additional pages, if needed).*

Number of members that participated:

Volunteer hours for the activity:

Total Man Hours for activity:

\$ Amount Raised:

Please include, when possible, any pictures, press releases, print clippings, or other publicity received as a result of the event.

Please send this completed form to the Delta Chi Director of Chapter Services:
The Delta Chi Fraternity
P.O. Box 1817
Iowa City, IA 52244

Or email as an attachment to chapterservices@deltachi.org