



## SPECIAL EVENTS COMMITTEE REPORT FORM

Committee: \_\_\_\_\_ Board Meeting: \_\_\_\_\_  
Time began: \_\_\_\_\_ Time ended: \_\_\_\_\_ Date: \_\_\_\_\_

Committee Chairperson(s):

Members:

_____	_____
_____	_____
_____	_____
_____	_____

Advisors:

_____	_____
_____	_____

Which committee directives were accomplished?

Which committee directives were not accomplished? How do you plan to accomplish them?

What was accomplished other than the committee directives given by your governor?

Which committee directives do you expect next?

*Please attach any materials pertaining (i.e. minutes, agenda) to your Committee Report Form. Copies go to the District Administrator, Zone Administrator, District Governor, District Secretary, International Trustee, Committee Members, and Committee Advisors within ten days of the Board Meeting.*