

# CHAPTER ALLOCATION MINUTES VERIFICATION FORM

Complete all information on this form plus the Chapter Allocation Form (AA201) to receive the annual \$25 for remaining an active chapter by conducting at least four meetings a year.

CHAPTER # \_\_\_\_\_ Park Name \_\_\_\_\_

1. Date \_\_\_\_\_ #Members in attendance \_\_\_\_\_

Speaker/Topic: \_\_\_\_\_

Voting/issues: \_\_\_\_\_

2. Date \_\_\_\_\_ #Members in attendance \_\_\_\_\_

Speaker/Topic: \_\_\_\_\_

Voting/issues: \_\_\_\_\_

\_\_\_\_\_

3. Date \_\_\_\_\_ #Members in attendance \_\_\_\_\_

Speaker/Topic: \_\_\_\_\_

Voting/issues: \_\_\_\_\_

\_\_\_\_\_

4. Date \_\_\_\_\_ #Members in attendance \_\_\_\_\_

Speaker/Topic: \_\_\_\_\_

Voting/issues: \_\_\_\_\_

\_\_\_\_\_

Chapter President/Secretary's signature: \_\_\_\_\_

DATE \_\_\_\_\_