2024 LOCAL GROUP PROJECT AWARD - FORM 4

Local Chapter Name: _____ Area #: _____

Report submitted by: _____ Phone: _____

Address: _____

City/St/Zip: _____

Email: _____

County: _____

Please give a concise description in **no more** 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.** It would be ideal if your group project includes the majority of your membership. Continue on the back if needed.

Your project is: NEW or EXPANDED (circle)

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Group Project—Local Chapter Name_____ Area #: _____

Please send your nomination to your Area Community Service Chairperson by January 31.