

**Kiwanis Club of Tecumseh
Monthly Activity Report**

Month: _____

Committee: _____

Chair: _____

Brief Description of Projects/ Activities:

Total number of Kiwanians involved: _____

Total number of manhours: _____

Total dollars spent for the month: _____

(Please copy for your records. Bring original to monthly board meeting - last Wednesday of each month, 6:45 am at the Hospital - or deliver to Earl Mason on the Tuesday morning prior to the board meeting.)