(Comple	ete this report a	fter the Spr	ing Leaders	ship Planning Co	onference)	
Mailing Address	·····					
	and the second s	P 1		······································		
Meeting Day and Time			·····			
Number of Members:	Men				Associate	***************************************
	Women				Minorities	
Annual Dues	\$					
District Governor						
Regional Director	***************************************			<u>., </u>		
Membership Goal for New M	1embers		Number		-	
			Percent	***************************************	-	
Comments:						
				Incoming P	resident (sign and o	date)

NOTE: By May 31, send report to:

- District Governor
- Retain one copy for local Board use.