

Philanthropy Report Form

Fraternity/Sorority: _____

Quarter: _____ Year: _____

Philanthropy Event	Beneficiary	Total Dollars Raised

Signature of Philanthropy Chair: *By signing this form, you are signing a contract that this is the correct number of hours you have completed this quarter. If any of this information is incorrect or falsified, your chapter's standing within the University could be negatively affected.*

Name: _____ Date: _____

****Please attach any supplemental documents and/or proof of Philanthropy event. (EX: photos, flyers, agenda, information about beneficiary, etc...)**