

WASHINGTON STATE OXFORD HOUSES

CHAPTER REPORT SUMMARY

Complete and bring to the State meeting

Months of _____ & _____ Date ____ / ____ / ____

Chapter # _____ Number of houses _____ Number of beds _____

Chapter meeting day/time _____

Checking account balance \$ _____

Savings account balance \$ _____

Petty cash balance \$ _____

Number of vacancies _____

Number of relapses _____

Chapter dues to State paid; Yes _____ No _____ Amount \$ _____

Audits (last 2 months) attached? Yes _____ No _____

Total amount of contribution paid to National \$ _____

Comments: (How is your Chapter doing? AA-NA meeting attendance, conflicts, houses in trouble, loan payments, fund raisers, social events, etc....)

Signature _____

Title _____