



Quarterly Chapter Reporting Requirement

Chapter#

TREA HQ 12200 E Briarwood Ave, Suite 250 Centennial, CO 80112

Date

Prepared by:		Chapter#	Date
Chapter Address		Telephone #	
City/State/Zip		Email:	
1. The following report is provided per TREA Standing Rule 9, Paragraph 11b:			
a. Chapter Community So	ervice Activities during this quarter:		
b. Chapter interface and	activities with other Veterans organizations	during this quarter:	
c. Fundraising activities d	uring this quarter:		
d. Action(s) taken to incre	ease attendance to chapter meetings this qu	uarter:	
e. Date, Time, and Place o	of Meetings:		
f. Do you have an Auxiliary? If you do not have an Auxiliary, what action have you taken to get an Auxiliary started?			
YES	NO		
g. Do you have a Legislat YES	ive Affairs report at each meeting? if so, who	gives the report?	
-	g speaker during this quarter? If so, Who? WI	nat was the subject matter?	
i. What training activities have you had this quarter to prepare persons to become chapter officers?			
2. Additional Remarks:			
I certify that to the best of my knowledge, the information contained above is accurate.			
Signature of Chapter President			