



## Missouri State Council

### EASTERSEALS

Chapter Name \_\_\_\_\_ Number \_\_\_\_\_

City \_\_\_\_\_

Chapter Easter Seals or Philanthropic Chairman

Name: \_\_\_\_\_

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Number of members including pledges as of February 28: \_\_\_\_\_

Total Contributions Year-to-Date: March 1 – February 28

3/1 – 2/28	Donated Money	Donated Goods \$	Number Of Miles	Donated Hours
<b>TOTALS</b>	<b>\$</b>	<b>\$</b>		
<i>The above does not include ink cartridges or cell phones sent in</i>				
Number of Ink Jet Cartridges (Number only – not dollar amt.)				

**ESA MISSOURI Chapters - EASTERSEAL CHALLENGE: "WISH LIST PROJECT"**

**Total - \$** \_\_\_\_\_

(TOTAL MONEY AND GOODS DONATED THROUGHOUT THE YEAR)

Projects your chapter held / worked on / donated to for Easter Seals:

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If you had a successful project, please share any comments, suggestions and ideas:

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Submit by March 1st to: Molly Vehige  
 405 Runnymede  
 Creve Coeur, MO 63141  
 (314) 609-3919  
 mollyvehige221@gmail.com