



President's Special Project

2024-2025 Report Form

Sheila Justice, Dept. Chairperson

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Auxiliary _____ District _____ Month _____ Chairman _____

Reporting Period: From _____ To _____

This month - Hours _____ Report Value \$ _____ Mileage _____ Volunteers # _____

Monetary donations (sent to Dept. Treasurer) Date sent _____ Amount \$ _____

Did your auxiliary hold a fundraiser/event for the President's Special Project? _____ Yes _____ No

Date held _____

Description and/or details of fundraiser/event held for PSP. (attach additional pages if needed)

100 Bonus Points will be awarded for those who send a monthly report ("No Report" does not count)