

***Bexar County 4-H & Youth Development Program
Club Manager/Project Leader Monthly Report***

Club Name: _____ Meeting Date: _____

Type of Meeting (Business or Project): _____

Name of Project Meeting (Swine, Clothing, etc): _____

of Leaders Attended: White: ___ Black: ___ Hispanic: ___ American Indian: ___ Other: ___
 Female: ___ Male: ___

of Members Attended: White: ___ Black: ___ Hispanic: ___ American Indian: ___ Other: ___
 Female: ___ Male: ___

of hours Adults volunteered this month: _____

of Adult volunteers/parents trained or assisting with 4-H projects this month: _____

of Individual contacts made (phone calls, email, visits, letters, etc.) this month: _____

Business discussed or topics taught this month:

Program: _____

Donations/Funding: _____

Club Manager/Project Leader: _____

*****DUE MONTHLY BY THE 25TH TO THE COUNTY EXTENSION OFFICE*****

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