



SERVICE REPORTING FORM

EPSILON SIGMA ALPHA

Please complete this form for all service efforts completed on behalf of ESA.

- Submit **ONE** form per project and submit only once. Check with your group to avoid duplicates.
- If a project supports multiple organizations, submit a separate form for each.
- For multi day projects, submit the form as needed.
- If applicable, notify your Chapter Service Reporter after submitting.

SERVICE CONTRIBUTION DETAILS:

Service Completed By An individual who is in a chapter An individual who is MAL
(Choose One): Chapter(s) District/Zone State Region International

List all members or ESA groups involved in the project: _____

Who Hosted the event/Project: _____ **State:** _____

Project Name: _____ **Project Completion Date:** _____

Organization Supported St. Jude Easterseals Hope for Heroes (fill in below)
(Choose One): ESA Foundation Other Supported Organization (Fill in below)

H4H or Other Organization Supported: _____

Total Miles Traveled by ESA Members to Complete This Project: _____

Total Volunteer Hours Served: _____ **Dollars Donated:** _____

Donated Goods and Estimated Value: _____

REQUIRED FOR ST. JUDE MONETARY DONATIONS:

Chair Name: _____

Number of Checks Mailed to ESAMC: _____ **Date Mailed:** _____

Collected for the "From My Birthday to Yours" Campaign: YES NO

Dedicate this donation (choose one): Honor Of Memory Of

Dedicated To (Name): _____

Send dedication card to (Name and address): _____

If you are mailing checks for St. Jude, please mail this form to ESA Staff at: Epsilon Sigma Alpha 2580 E Harmony Rd, Suite 301-11, Fort Collins, CO 80528. Otherwise, please mail this form to your State Philanthropic Chair. If you do not know who that is, reach out to ESAMC staff by emailing esainfo@epsilonsigmaalpha.org or calling us at [970.223.2824](tel:970.223.2824)