



MD 24 B Cabinet Member Report

District: _____ Region: _____ Zone: _____ Reporting Period: _____

Cabinet Member: _____ Position: _____

Summary of Activities during Period:

**Use back or type an additional sheet if needed.

Clubs Visited:	Program	Official	Non Official

Actions needed:	Recommendations:

Time Management	# Hrs	Travel Time	# Miles	# Calls	# Emails	# letters	# Posts	Other
Leadership								
Education:								
Membership:								
Service:								
Fund Raising:								
Total								