



# Alliance CLUBS INTERNATIONAL

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## ALLIANCE CLUBS MONTHLY ACTIVITIES & ADMINISTRATION REPORT

NAME	CLUB NUMBER	MONTH
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TO,  
ALLIANCE CLUBS INTERNATIONAL

Dist. CABINET Secretary

TEL. NO.

FROM :

Secretary

PIN

TEL. STD CODE :

OFFICE

RESI.

EMAIL ID

BELONGS TO [ ] SECRETARY [ ] PRESIDENT [ ] ANY OTHER MEMBERS OF THE CLUB

ANY ONE REQUIRED MANDATORY

MEMBERSHIP STRENGTH

(PLEASE ATTACH LIST OF MEMBERS ADDED AND DROPPED ALONG WITH POSTAL ADDRESS & TELEPHONE NOS.)

AS PER LAST MONTH

+ ADDITION DURING THE MONTH

- DROPPED DURING THE MONTH

= CLOSING BAL. OF THE MONTH OF

### DETAILS OF GENERAL MEETING

DATE	VENUE
ATTENDANCE	

### DETAILS OF OTHER MEETING

DATE	VENUE
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### DETAILS OF BOARD MEETING

DATE	VENUE	
ATTENDANCE (MEMBERS)	NO. OF PERSONS BENEFITED	AMOUNT SPENT RS.

### ACTIVITY PERFORMED

ANY OTHER DETAILS

DATE	PLACE
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NOTE : ADD PHOTOGRAPH AND NEWSPAPER CLIPPING WHEREVER POSSIBLE

SEND ORIGINAL TO INTERNATIONAL SECRETARY  
2ND COPY TO DIST. SECRETARY AND RETAIN 3RD COPY

SIGNATURE OF PRESIDENT / SECRETARY