**STATEMENT OF SERVICE PERFORMANCE** 

|  **Individual/Branch/Provincial/Group name:** |  |
| --- | --- |
| **Region #:** |  |
| **Completed by/Position:** |  |
| **Signature:** |  |
| **Date:** |  |

| **1. CHARITABLE GIVING - CASH** |
| --- |
| Date | Amount | Beneficiary | Reason for donation | Other Information | Evidence attached Y/N |
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| Date | Amount | Beneficiary | Reason for donation | Other Information | Evidence attached Y/N |
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| **2. CHARITABLE GIVING – IN KIND** |
| Date | Nature & value | Beneficiary | Reason for donation | Other Information | Evidence attached Y/N |
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| **3. CHARITABLE GIVING – VOLUNTEERING & OTHER** |
| --- |
| Date | Nature of work done | Hours | Beneficiary | Reason for donation | Other Information | Evidence attached Y/N |
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| **4a. COLLABORATION & COMMUNITY RELATIONSHIPS – RWNZ MEMBERS ONLY**  |
| --- |
| Date | Location | Others involved | Purpose | Charitable purpose Y/N | Beneficiary  | Evidence attached Y/N |
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| **4b. COLLABORATION & COMMUNITY RELATIONSHIPS – INCLUDING NON-MEMBERS** |
| Date | Location | Others involved | Purpose | Charitable purpose Y/N | Beneficiary  | Evidence attached Y/N |
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| **5. OUR VOICE** |
| --- |
| Date | Location | Others involved | Purpose | Charitable purpose Y/N | Beneficiary  | Evidence attached Y/N |
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