

# Monthly House Summary Report

(To be completed and brought to chapter meeting each month)

Name of House: \_\_\_\_\_ Date of Chapter Meeting: \_\_\_\_\_

House Capacity: \_\_\_\_\_ Vacancies: \_\_\_\_\_ # of Applications Received: \_\_\_\_\_ # Admitted: \_\_\_\_\_

# of Departures since last meeting - Relapses: \_\_\_\_\_ Voluntary: \_\_\_\_\_ Other: \_\_\_\_\_

Total Number of Residents at the end of the month: \_\_\_\_\_

Day & Time of Business Meetings: \_\_\_\_\_

Amount in checking account: \$ \_\_\_\_\_ Savings account: \$ \_\_\_\_\_

Are ALL bills paid in FULL? Yes \_\_\_\_\_ No \_\_\_\_\_ (if no list who and the amount owed)

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Number of Members owing E.E.S. \_\_\_\_\_ Total E.E.S. owed to the house: \$ \_\_\_\_\_

Has LOAN been paid: Yes \_\_\_\_\_ No \_\_\_\_\_ Amount of payment: \$ \_\_\_\_\_

Amount of contribution paid to World Services: \$ \_\_\_\_\_

Names of Service Committee Volunteers: \_\_\_\_\_

Names and amounts of people who left your house owing money for this month:

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Has an AUDIT been done: Yes \_\_\_\_\_ No \_\_\_\_\_ When: \_\_\_\_\_

(Please conduct an AUDIT with at least the following officers: President, Treasurer, and Comptroller)

Comments: (how is your house doing? AA-NA meeting attendance, conflicts, etc. etc. etc.)

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Signature: \_\_\_\_\_ Title: \_\_\_\_\_