OFFICIAL MONTHLY REPORT This report should be forwarded as early as possible following the final meeting—the white blank to International Headquarters, the pink blank to the district secretary, the blue blank to the lieutenant governor, the yellow to be retained by the secretary. Kiwanis Club of GOLDWATER? MICHIGAN Month of_ APRIL (State) Secretary L D WATSON 39 DICISION Address 6:15 P M NOT YET DEFINATE WEDNESDAY Hour Day Club meeting place MEMBERSHIP AND ATTENDANCE RECORD In the "Membership" column give the total number of ACTIVE, RESERVE and PRIVILEGED members on your roll each week, and in the "Attendance" column the total number in attendance. Should no meeting be held, give the total number of members on the roll and record a zero for attendance. Attendance Membership Active, Reserve and Privileged Membership Attendance Active, Reserve and Privileged Active, Reserve and Privileged Active, Reserve and Privileged 25 25 No meet First Week..... ing Fourth Week... 23 25 24 25 Second Week.... Fifth Week 25 25 100 97 Total..... Third Week..... 97 Percentage of Attendance for Month (Divide Total Attendance by Total Membership) Our first meeting held 4/10/35 **CLUB MEETING PROGRAMS** Committee in Charge Remarks Subject Date Speaker Hillsdale Club put on meeting Claude Dock Kiwanis Activities April 10 Chas LeFurge Club Administration and Committee Activities Cpril 17 April 24 Careof teeth Program Dr Hadley Carl McConnell Dept. Store Management INTER-CLUB RELATIONS Here report all plans for promoting inter-club relations, including inter-club meetings. In reporting inter-club meetings, indicate date, place, number of clubs represented, total number present, and the number of your club members attending, and any special features. Meeting of 4/10/34 with Hillsdale Club at Barrish House in Coldwater. 55 present with 22 from Coldwater and 2 excused absence. COMMITTEES Business Remarks No. of Name of Transacted Committee Meetings

Committee bodies not yet appointed except Chairmen

SOCIAL ACTIVITIES

Here report social activities such as stag parties, ladies' nights, dances, ladies' luncheons, ball games, ball tournaments, golf tournaments, picnics, joint meetings with other organizations of the community, etc.

Charter Night program May 8th Ladies night and floor show

RELATION TO DISTRICT AND INTERNATIONAL

Here report attendance at divisional, district, and International meetings, district contacts, date of submitting reports, payment of dues and magazine subscriptions.

the class through he men initiative. It will also include any such activities in which the club has contraded with other organizations or appropriate activities in which the members of the class have extually perturbated.

(Use next page for reporting activities.)

Name of Member	Classification	Address	Date of addition	Kind of Member- ship	If former Kiwania Name Club
Bonfiglio	Gas & Light	Coldwater, Mid	4/26	ct1ve	No
	per experience or experience		anopre de	NA RES	
	Name of Member Bonfiglio			Name of Member Classification Address Date of addition	Name of Member Classification Address Date of Member-ship

Name of Member	Classification	A	ddress	Date of deletion	Kind of Member- ship	Reason	
Vern O'Neil	Grocer	Coldwater, the pheed under the probability of		l Objec	Special	These two me	
Alas Bates	Teacher	Coldwater	qi en vara ilipasi in a		8 8	y Walter Ing nd not defin igned. Have ecided not t ues not paid	
	Cl	anges of Classi	fication			The state of the s	
Name of Member	Former Classification	Present Classification	Address		Date of Change	Kind of Membership	
Bailey Stoddard	Banking	Insurance	Coldwater- so Jefferson	St	1/15	Active	
		Changes of Add	dress				
Name of Member	Classification	New Address Old Address		Date Effective			
None						2. Boys and Gir	
(Non-m	Addition	al Subscriptions	to Magazine	itutions	only)		
(Non-m	embers, libraries, clubs Former Subscriber	al Subscriptions , hospitals, other	to Magazine organizations and inst	itutions «	only)	Annual or Permanent	
	embers, libraries, clubs Former Subscriber (YesNo)	, hospitals, other	organizations and inst		only)	Annual or Permanent	
Name of Member	embers, libraries, clubs Former Subscriber (YesNo) Members Comp	, hospitals, other	Address Receipt of Magazine		only)		
	embers, libraries, clubs Former Subscriber (YesNo)	, hospitals, other	organizations and inst		only)	Annual or Permanent	

[Signed]_

Secretary

[Signed]_

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