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| **A picture containing icon  Description automatically generated** | DAV Department of South Carolina  District Committeeman Report  (Problem at Chapter) | | | | |  |
| **District Number:**  Select Dist. No. | | **District Committeeman Name:**  Input Name | | | | |
| **Date:**  Select date | | **Chapter Number:**  Select Chapter No. | **Chapter Name:**  Select Chapter Name | | | |
| **District Committeeman, how where you contacted and made aware of the issue at the chapter?**  Input Information | | | | | | |
| **Describe the issue at the Chapter:**  Input Issues | | | | | | |
| **What steps has the Chapter taken to resolve the issue?**  Input Steps | | | | | | |
| **As District Committeeman, what have you done to assit with resolving the issue?**  Input Assistance | | | | | | |
| **Did the Department become involved in helpig resolve the issue?** | | | | | SelectYesorNo | |
| **If Yes, explain.**  Input Explanation | | | | | | |
| **Additional space (if needed):**  Use as Needed | | | | | | |
| **Date Issue resolved:** Select date | | | | | | |
| **Recommendation to Chapter:**  Input Recommendation | | | | | | |
| **Were you required to attend chapter meeting?** | | | | Select Yes or No | | |
| **If yes, please list date you attended meeting:** | | | | Select date | | |
| **If a follow-up meeting required?** | | | | Select Yes or No | | |
| **If yes please list date you attended meeting:** | | | | Select date | | |
| **District Committeeman’s Signature** | | | | **Date:**  Select date | | |