

Pioneer Total Abstinence Association

Report to Central Council



(This form should be used by Board of Management Sub-committees)

1. Committee Details

1.1 Name of Sub-committee _____

1.2 Details of Meetings (Please detail number of meetings held)

1.3 Meetings attendance (Please detail representation in attendance)

Date of Meetings	Connaught	Leinster	Munster	Ulster	Other	Total

1.4 Date of last Annual General Meeting: ____/____/____.

2. Report Details

(Please detail all items relating to this sub-committee)

Report submitted by: _____

Date of Report: ____/____/____.