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| **PARTNERS OF WHA, INC.** | | | | | | | | | | | |
| **YEAR-END REPORT FOR \_**  **COMPILED COMMUNITY HEALTH EDUCATION STATE CHAIR’S REPORT**  **January 1-December 31** | | | | | | | | | | | |
| **State CHE Chair** | | | | | | | | **No of District Reporting** | | | |
| **Telephone No.** | | | | **Email** | | | | **Fax No.** | | | |
| **District** | **No. of local organizations** | **No. local organiza**  **tions reporting** | **No. w/CHE Chairs** | | **No. Assisting in Hospital Education Projects**  **(1)** | **No. of Ongoing Projects in Last 12 Months**  **(2)** | **No. New CHE Projects for Year**  **(3)** | | **Total Health Education Projects**  **(4)** | **No. of Articles Written For Newsletter**  **(5)** | **Reports Given at General Membership Meetings**  **(6)** |
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| **Total** |  |  |  | |  |  |  | |  |  |  |
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**For responses to questions 7 and 8 use reverse side**

**State Community Health Education Chair\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Report Form State Community Health Education Chair**  **page 1 of 1 February 2015**