# Stakeholder Partnerships, Education, and Communication Activity Report

**(See instructions on reverse)**

| 01. SPEC Employee Name & SEID | 02. Territory/Office Name | 03. Office Location Code ☐☐ - ☐☐ | Date of Activity |
|---|---|---|---|
| | | | |

DIRECT CONTACTS ONLY

**Program Activity:** Enter Information Specified by Instructions on Back

| Program | Number of Taxpayers Reached | Number of Volunteers Assisting Direct Activities | Number of Sessions |
|---|---|---|---|
| 04. Compliance Outreach | | | |
| 05. EITC Outreach | | | |
| 06. E-Services Outreach | | | |
| 07. All Other Outreach | | | |
| **08. Totals** | | | |

09. Description of Activity and how the targeted audience was determined.

10. To be completed by the IRS Territory Office Only:

| Date Input | Input By / (Name & SEID) |
|---|---|
| | |