Date: DD/MM/YYYY

Embassy of Japan in Zambia

Name of Organization:

Representative title:

Representative name:

Telephone number:

Contact person:

**Summary Report**

On (DATE) , the event approved for the 60th anniversary of the establishment of diplomatic relations between Zambia and Japan was completed. The following is a summary report of the event:

**1. Name of Event**

**2. Name of Organizer**

**3. Name of Co-organizer(s), Nominal Supporter(s)**

**4. Date of Event**

**5. Place of Event**

**6. Usage of official logo (media type and record of usage)**

**7. Summary of event**

**8. Surplus or deficiency of budget**

**9. Additional Remarks**