

FRATERNAL PROGRAMS REPORT FORM

Reporting Officer Name: Thomas Lough Membership Number: 2487126

Council Number: 12054 Date(s) of Program 11 / 3 / 2022 to 11 / 3 / 2022

State / Province: MD

1	Faith	Family	Community	Life
	<input type="checkbox"/> Into the Breach <input type="checkbox"/> Pilgrim Icon Program <input type="checkbox"/> Build the Domestic Church Kiosk <input type="checkbox"/> Rosary <input type="checkbox"/> Spiritual Reflection <input type="checkbox"/> Holy Hour <input type="checkbox"/> Sacramental Gifts <input type="checkbox"/> RSVP <input type="checkbox"/> Other	<input type="checkbox"/> Family of the Month <input type="checkbox"/> Keep Christ in Christmas <input type="checkbox"/> Family Fully Alive <input type="checkbox"/> Family Week <input type="checkbox"/> Consecration to the Holy Family <input type="checkbox"/> Family Prayer Night <input type="checkbox"/> Good Friday Family Promotion <input type="checkbox"/> Food for Families <input type="checkbox"/> Other	<input type="checkbox"/> Disaster Preparedness <input type="checkbox"/> Free Throw Championship <input type="checkbox"/> Soccer Challenge <input type="checkbox"/> Helping Hands <input type="checkbox"/> Catholic Citizenship Essay Contest <input type="checkbox"/> Coats for Kids <input type="checkbox"/> Global Wheelchair Mission <input type="checkbox"/> Habitat for Humanity <input type="checkbox"/> Other	<input type="checkbox"/> Christian Refugee Relief <input type="checkbox"/> Silver Rose <input type="checkbox"/> Pregnancy Center Support <input type="checkbox"/> Novena for Life <input type="checkbox"/> Mass for People with Special Needs <input type="checkbox"/> March for Life <input type="checkbox"/> Special Olympics <input type="checkbox"/> Ultrasound <input checked="" type="checkbox"/> Other

If Other, Program Name: Choices Pregnancy Center Dinner

2 Volunteers: $\frac{10}{\text{Members}} + \frac{5}{\text{Non-Members}} = \frac{15}{\text{Total Volunteers}}$ $\frac{15}{\text{Total Volunteers}} \times \frac{2}{\text{Hours (Per Person)}} = \frac{30}{\text{Total Volunteer Hours}}$

Participants (Non-Volunteer): 15 Was your Pastor present? Yes No

Program Planning: $\frac{0}{\text{Cost}} \& \frac{30}{\text{Time (Hours)}}$ Members Recruited: 0 Donations: $\frac{0}{\text{Local Currency}}$

3 On a scale of 1-5 (with 5 being the highest) how engaged was your parish and council by this program? 5

4 What information or feedback would you like to share about your program? (To share more success stories, visit kofc.org/knightsinaction)

This dinner was to raise money for our local pregnancy center. It was well attended by over 300 people and our council was there in force to support and donate.

