



For Twelve Month Period Ending December 31, 20__

Council Number _____ **Location** _____
city/town state/province

I. NUMBER OF MEETINGS HELD DURING YEAR:

1. Regular
2. Social
3. Special

TOTAL NUMBER OF MEETINGS HELD

II. ACTIVITY EXPENSE

DOLLARS ONLY:

1. a. Printing and Postage
- b. Food and Refreshments
- c. Prizes
- d. Projects
- e. Entertainment
- f. Miscellaneous

TOTAL ACTIVITY EXPENSES

III. CHARITABLE DISBURSEMENTS:

Church Activities

DOLLARS ONLY:

1. a. Church Facilities
- b. Catholic Schools
- c. Religious Education
- d. Seminarians/RSVP
- e. Seminaries
- f. Vocations Projects
- g. Miscellaneous

Total Church Disbursements

Community Activities

DOLLARS ONLY:

2. a. Elderly
- b. Physically Disabled
- c. Special Olympics
- d. Intellectual Disabilities
- e. Human Needs
- f. Pro-Life Programs
- g. Victims of Disasters
- h. Hospitals/Institutions
- i. Health and Service Organizations
- j. Community-wide Projects
- k. Habitat for Humanity Projects
- l. Miscellaneous

Total Community Disbursements

Youth Activities

DOLLARS ONLY:

3. a. Columbian Squires
- b. Scouting
- c. Youth Groups
- d. Youth Welfare/Services
- e. Athletics
- f. Scholarships/Education
- g. Miscellaneous

Total Youth Disbursements

TOTAL CHARITABLE (Church, Community and Youth) DISBURSEMENTS

IV. FRATERNAL COMMITMENT:

1. Number of visits to:
 - a. Sick
 - b. Bereaved

Total Visits

2. Number of blood donors
3. Habitat for Humanity Projects

Estimated hours of volunteer service:

4. a. Church
- b. Community
- c. Youth
- d. Habitat for Humanity
- e. Miscellaneous

Total Volunteer Hours

Estimated hours of fraternal service:

5. Sick/disabled members and their families

(Signed) _____
(Grand Knight)

(Signed) _____
(Financial Secretary)

Date: _____