



**INSTRUCTIONS FOR COMPLETING REPORT FORM
For Twelve Month Period Ending December 31, 20__**

**Due By:
JANUARY 31**

***IMPORTANT**

- * *Please type or print legibly.*
- * *Please record information to reflect members and their families' participation.*
- * **INCLUDE SQUIRES AND 4TH DEGREE ASSEMBLY TOTALS IN THIS REPORT.**
- * *Include financial contributions and hours of community service from all Special Olympics programs (i.e. "Family Leadership and support," "Invest in a Life," etc.)*
- * **UNITS IN THE PHILIPPINES SHOULD REPORT ALL FINANCIAL DATA IN PESOS.**
- * **MAKE A PHOTOCOPY OF SURVEY REPORT FOR YOUR COUNCIL FILE.**

SECTION I. VOLUNTEER HOURS PROVIDED BY K of C MEMBERS AND THEIR FAMILIES TO SPECIAL OLYMPICS THROUGHOUT THE CALENDER YEAR:

Volunteer service with all levels of Special Olympics by Council members and their families — games, events, programs, special initiatives, etc.

SECTION II. NUMBER OF K of C VOLUNTEERS AT SPECIAL OLYMPICS GAMES AND EVENTS:

Event-Specific K of C Volunteers — announcer, athlete escort, awards presenter, competition volunteer, family services, food services, lane escort, lane judge, scorekeeper, timer, transportation, venue services, etc.
Year-Round K of C Volunteers — program management, administration, clerical, planning, games management, sports training, Special Olympics Board Member, coaching, etc.

SECTION III. NUMBER OF EVENTS IN WHICH K of C MEMBERS AND FAMILIES VOLUNTEER:

All events involving Special Olympics — state, national, international games, community programs, etc.

Special Olympics Initiatives:

- Athlete Leadership Programs
- Family Leadership and Support
- Schools and Youth
- Healthy Athletes
- Law Enforcement Torch Run

SECTION IV. TOTAL FUNDS CONTRIBUTED TO SPECIAL OLYMPICS:

Local, state, and national contributions, "Healthy Athletes", donations to Special Olympics initiatives, etc.
Donations to Special Olympics Support Programs:

- Online Donation
- Mail / Telephone Donation
- Planned Giving
- Matching Gifts
- Wedding / Special Occasion Favors
- Monthly Giving
- Frequent Flyer Miles

SECTION V. NEW EVENTS ADDED THIS YEAR:

Please provide the names of any new sporting events that your Council has contributed to or added to Special Olympics on any level this year.

SECTION VI. SPECIAL OLYMPICS AFFILIATIONS:

Please provide the names of any Special Olympics groups, organizations or teams with which your council is affiliated or actively supports. Please indicate if this is a local, regional, or state organization or group.



For Twelve Month Period Ending December 31, 20__

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

I. Volunteer Hours provided by K of C members and their families to Special Olympics throughout the calendar year.

1. State Games/Events

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2. Regional Games/Events

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3. Local Games/Events

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TOTAL VOLUNTEER HOURS

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II. Number of K of C Volunteers at Special Olympics Games and Events.

EVENT-SPECIFIC VOLUNTEERS

1. State Games/Events

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2. Regional Games/Events

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3. Local Games/Events

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Total Event-Specific

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YEAR-ROUND K of C VOLUNTEERS

1. State Games/Events

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2. Regional Games/Events

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3. Local Games/Events

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Total Year-Round

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**TOTAL K of C VOLUNTEERS
(Event-Specific and Year-round)**

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III. Number of Events in which K of C members and families volunteer.

1. State Games/Events

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2. Regional Games/Events

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3. Local Games/Events

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TOTAL EVENTS

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IV. Total Funds Contributed to Special Olympics.

Dollars Only

1. State Games/Events

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2. Regional Games/Events

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3. Local Games/Events

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TOTAL CONTRIBUTIONS

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V. New Events Added This Year.

VI. Special Olympics Affiliations

Date: _____ (Signed) _____ (Grand Knight)

(Signed) _____ (Financial Secretary)