

## STATE ABUSE LIFESAVERS PROJECT TRACKING/REPORTING 2021

Court \_\_\_\_\_ # \_\_\_\_\_

CITY \_\_\_\_\_ REGENT \_\_\_\_\_

EMAIL \_\_\_\_\_

ADDRESS (street, town, zip) \_\_\_\_\_

LOCAL CHAIRMAN \_\_\_\_\_

BAGS PURCHASED FOR DISTRIBUTION \_\_\_\_\_ DATES OF DISTRIBUTION \_\_\_\_\_

NUMBER OF MEMBERS PARTICIPATING \_\_\_\_\_

TYPES OF ADVERTISEMENT (posters, bulletin announcement, pulpit announcement by priest, script read at mass by member, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

TOTAL AMOUNT OF DONATION COLLECTED \$ \_\_\_\_\_

50% OF TOTAL DONATION OR MINIMUM OF \$50.00 TO BE SUBMITTED TO STATE \$ \_\_\_\_\_

50% OF TOTAL DONATION (less the cost of Lifesavers) DONATED TO LOCAL PROJECT \$ \_\_\_\_\_

Please use the back or another sheet to answer the following questions:

Please describe in detail the projects your Court did for Fund Raising for the Lifesavers/Abuse Project:

- (a) How did you get your parish to participate and (b) what did you do to educate the parishioners?
- (c) What worked and didn't work and (d) what would you do differently next year?

OTHER COMMENTS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you for completing this report. We suggest you keep a copy to pass on to the next chairman.

WITHIN 30 DAYS OF PROJECT COMPLETION SEND COMPLETED FORM TO STATE ABUSE CHAIRMAN:

Carol Kling

State Abuse Chairman

420 Main Ave. #1

Lemmon, SD 57638

(or email [ckling@sdplains.com](mailto:ckling@sdplains.com))

SEND YOUR COURT CHECK (50% OF DONATION or MINIMUM OF \$50.00) WRITTEN TO "SD CDA" TO STATE SECRETARY:

Lynda Steichen

CDA Secretary

23579 US Hwy 281

Woonsocket, SD 57385