

Date: \_\_\_\_\_

**STATE ABUSE LIFESAVERS PROJECT TRACKING/REPORTING 2022**

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 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** AND YOUR  
COURT **CHECK** (50% OF DONATION or  
MINIMUM OF \$50.00) WRITTEN TO :

**SD Catholic Daughters of the Americas**  
Mail to: Lynda Steichen CDA Secretary  
23579 US Hwy 281  
Woonsocket, SD 57385