September 25, 2019

Worthy Circle of Love Chairman,

I want to personally thank you for accepting the challenge and the position of Court Chairman for the Circle of Love Program for 2018 – 2020.

Attached please find a copy of this year’s forms. Please be sure to ask your State Regent for the name and address of the State Chairman if it is not already on the form.

Please note the following guidelines for reporting on these forms:

- You should file the report for the two-year period of February 1, 2018, to February 1, 2020.

- As court chairman, please select ONE outstanding or unique event in which your court participated in your specific area of the Circle of Love and send it to the state for consideration and recognition. Be sure to include a completed cover sheet, “LOCAL Chairman to State Chairman.”

- In addition to mailing it to the State Chairman, please keep a copy of the cover sheet and entry for your court files.

- Remember: your submission must go through the state. Do not mail submissions directly to the national chairman.

Please encourage your court to participate in your spoke of the Circle of Love Program.

Thank you for your dedicated service to our organization and to our Church through the Catholic Daughters of the Americas.

In Unity and Charity,

Olga Samaniego, National Regent
Local Court Chairman to State Chairman
Catholic Daughters of the Americas®
LEADERSHIP
Circle of Love Reporting Form
February 1, 2018 – February 1, 2020

Court Name_________________________________________Number________________
Regent________________________________________Local Chairman________________
Number of Members________________________________Email__________________________
Address____________________________________________________________________
City________________State________Zip________________

Local Court Chairman: Please fill out this form (Print/Type) and mail to:
State Chairman: Name___________________________________________________________
Address________________________________________City___________________________
State________Zip________Email_________________________________________________

Title of the Project ___________________________________________________________

Describe fully ONE project in the Circle of Love program for Leadership completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.
Local Court Chairman to State Chairman
Catholic Daughters of the Americas®

FAMILY
Circle of Love Reporting Form
February 1, 2018 – February 1, 2020

Court Name______________________________________Number________________________
Regent________________________Local Chairman____________________________________
Number of Members______________Email___________________________________________
Address_________________________________________________________________________
City____________________________State_________Zip________________

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name___________________________________________________________
Address_________________________________________________________________________
City________________________________________State______________________________
State_____________________Zip________________Email_________________________________

Title of the Project _________________________________________________________________

Describe fully ONE project in the Circle of Love program for Family completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.
Local Court Chairman to State Chairman
Catholic Daughters of the Americas®
QUALITY OF LIFE
Circle of Love Reporting Form
February 1, 2018 – February 1, 2020

Court Name______________________________________Number__________________

Regent_________________________________ Local Chairman_______________________

Number of Members________________ Email______________________________________

Address____________________________________________________________________

City________________________________________ State________ Zip_______________

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name________________________________________________________

Address________________________________ City__________________________

State________ Zip________ Email___________________________________________

Title of the Project _________________________________________________________

Describe fully ONE project in the Circle of Love program for Quality of Life
done by your court this past year. What was the goal for the activity? How many
were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this
report. We suggest that you keep a copy to pass on to the next chairman.
Local Court Chairman to State Chairman
Catholic Daughters of the Americas®
SPIRITUAL ENHANCEMENT
Circle of Love Reporting Form
February 1, 2018 – February 1, 2020

Court Name______________________________________Number___________________
Regent________________________________________ Local Chairman________________________________
Number of Members________________ Email_________________________________________________________
Address____________________________________________________________________________________
City________________________________ State________ Zip________________

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name________________________________________________________
Address________________________________________ City______________________________
State________________ Zip________ Email__________________________________________

Title of the Project

Describe fully ONE project in the Circle of Love program for Spiritual Enhancement completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.
Local Court Chairman to State Chairman
Catholic Daughters of the Americas®
EDUCATION
Circle of Love Reporting Form
February 1, 2018 – February 1, 2020

Court Name_________________________________________Number________________

Regent__________________ Local Chairman______________________________

Number of Members____________ Email_________________________________

Address_________________________________________________________________

City________________________ State_________ Zip_______________

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name____________________________________________________

Address________________________________________ City_______________________

State________________ Zip________ Email___________________________________

Title of the Project ________________________________________________________

Describe fully ONE project in the Circle of Love program for Education completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.
Local Court Chairman to State Chairman
Catholic Daughters of the Americas®
LEGISLATION
Circle of Love Reporting Form
February 1, 2018 – February 1, 2020

Court Name______________________________________Number_____________________

Regent_________________________________ Local Chairman________________________________

Number of Members________________ Email______________________________________________

Address______________________________________________________________________________

City_________________________________________ State___________ Zip______________

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name___________________________________________________________

Address________________________________________City__________________________

State_______________ Zip___________ Email___________________________________________

Title of the Project ________________________________________________________________

Describe fully ONE project in the Circle of Love program for Legislation completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.
Local Court Chairman to State Chairman
Catholic Daughters of the Americas®
YOUTH / JCDA
Circle of Love Reporting Form
February 1, 2018 – February 1, 2020

Court Name________________________________________________________Number________________
Regent___________________________ Local Chairman______________________________
Number of Members____________ Email_____________________________________
Address________________________________________________________________________
City___________________________ State________ Zip________________________

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman:  Name____________________________________________________________
Address________________________________________ City__________________________
State________________ Zip_________ Email__________________________________________

Part I: YOUTH

Title of the Project ________________________________________________________________

Describe fully ONE project in the Circle of Love program for Youth completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.
Court Name______________________________________Number__________________

Part II: JCDA

1. Does your court sponsor a Junior or Juniorette court?

2. If you answered no to the above question, are you planning on starting one soon? Please include details.

3. If you answered yes, please answer the following questions.

4. What is the name of the Junior court and how many members are in the court?

5. What is the name of the Juniorette court and how many members are in the court?

Describe ONE outstanding project from the Junior or Juniorette Court. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Title of the Project ____________________________________________________________

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.