CATHOLIC DAUGHTERS OF THE AMERICAS

NATIONAL HEADQUARTERS

10 WEST 71st STREET

NEW YORK, NY 10023
212-877-3041

(FAX) 212-724-5923

WWW.CATHOLICDAUGHTERS.ORG

September, 2021

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 in your local court for 2020-2022.

Attached please find a copy of the newly revised and updated forms. Please send the completed form to the National Chairman of that spoke of the Circle of Love.

Please note the following guidelines for reporting on these forms:

- You should consider filling in the report from the two-year period of March 1, 2020 to February 28, 2022.
- As court chairman please select the ONE most outstanding event in your specific area of
 the Circle of Love your court participated in or accomplished that is unique and send to
 the National Chairman of that spoke of the Circle of Love for consideration and
 recognition. Be sure to include a completed cover sheet, "Territorial Chairman to
 National Chairman."
- In addition to mailing it to the National Chairman, please keep a copy of the cover sheet and entry for your court files.
- Each project may be used only once. It cannot be entered in many or all categories.

Please encourage your courts to participate in this aspect 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,

Sherry Nilles National Regent



Territorial Court to National Chairman Catholic Daughters of the Americas_® LEADERSHIP

Circle of Love Reporting Form March 1, 2020-February 28, 2022

ourt NameNumber				mber
Regent	Local Chairman			
Number of Members	Emai	l		
Address			·····	
City		State_		Zip
Local Court Chairman: Please National Chairman:	fill out this for	m (Print/Type) a	and mail to:	
Name Essie Walker				
Address P.O. Box 664		City Matthey	vs	
State North Carolina	Zip 28106	Email v	walkerme772@	@gmail.com
Title of the Project				

Describe **fully ONE project** in the **Circle of Love** program for **Leadership** 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, parish, or community?



Territorial Court to National Chairman Catholic Daughters of the Americas_® FAMILY

Circle of Love Reporting Form March 1, 2020 – February 28, 2022

	Number			
Local Chairman				
Email				
	Zip			
City St. Charles				
Zip 66972	Email nancy@hbcsc.net			
	Local Chairman Email State e fill out this form (Print/Type) and City St. Charles			

Describe **fully ONE project** in the **Circle of Love** program for **Family** 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, parish, or community?

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.



Territorial Court to National Chairman Catholic Daughters of the Americas_® QUALITY OF LIFE

Circle of Love Reporting Form March 1, 2020 – February 28, 2022

Court Name			Number			
Regent	Loca	ıl Chairm	an			
Number of	Members	Email	1			
Address						
City			State	eZiŗ		
National Cl Name Em	hairman: ily Guilherme					
Address	14691 Walters Street		City	Corona		
State	California	Zip 92880	Email	emthanga1@aol.com	1	
Title of t	he 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, parish, or community?

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Territorial Court to National Chairman Catholic Daughters of the Americas_® SPIRITUAL ENHANCEMENT

Circle of Love Reporting Form March 1, 2020 – February 28, 2022

Court Name	Number				
Regent	Local Chairman				
Number of Members	Email				
Address					
City					
Local Court Chairman: Please National Chairman:	fill out this form (Print/Type) and mail to:				
Name Connie Dronette					
Address 610 Pitre Stree	t City Sulphur				
State Louisiana	Zip conniecda@yahoo.com				
Title of the Project					

Describe **fully ONE project** in the **Circle of Love** program for **Spiritual Enhancement** 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, parish, or community?

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Territorial Court to National Chairman Catholic Daughters of the Americas® **EDUCATION**

Circle of Love Reporting Form March 1, 2020 – February 28, 2022

Court Nam	Court NameNumber				Number	
Regent			Lo	cal Chairman		
Number of	Members		Email			
Address	· · · · · · · · · · · · · · · · · · ·					
City	· · · · · · · · · · · · · · · · · · ·			State	Zip	
Local Cour		Please fill o	ut this form (Print/Type) and mail	to:	
Name Dai	rlene Moritz					
Address	P.O. Box	474				
State	Iowa	Zip	51351	Email cda4dar@	@outlook.com	
Title of t	he Project					

Describe fully ONE project in the Circle of Love program for Education 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, parish, or community?

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Territorial Court to National Chairman Catholic Daughters of the Americas_® LEGISLATION

Circle of Love Reporting Form March 1, 2020 – February 28, 2022

Regent						
Address						
City		· · · · · · · · · · · · · · · · · · ·		State	Zip	
Local Cour National C	t Chairman: Please f hairman:	ill out this fo	orm (Print	Type) and mail (io:	
Name	Eileen Peterson					
Address	6 Patrick Natale	Court	City S	Stoney Point		
State	New York	Zip	10988	Email ra	chelminister1@aol.com	
Title of tl	he Project					

Describe **fully ONE project** in the **Circle of Love** program for **Legislation** 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, parish, or community?



Territorial Court to National Chairman Catholic Daughters of the Americas⊚ YOUTH / JCDA

Circle of Love Reporting Form March 1, 2020 – February 28, 2022

Court Name	Number				
Regent		Local	Chairman		
Number of Members		Email			
Address					
City				Zip	
National Chairman: Name Ivone da Silviera					
Address Urb. Sagrado	Corazon	421 Calle San	Jovina		
City San Juan	State	Puerto Rico	Email Ivone_c	eip@yahoo.com	
Part I: YOUTH					
Title of the Project					

Describe **fully ONE project** in the **Circle of Love** program for **Youth** 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, parish, or community?

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.



Territorial Court to National Chairman Catholic Daughters of the Americas_® YOUTH / JCDA

Circle of Love Reporting Form March 1, 2020– February 28, 2022

Court Name_____Number____

Part !	II: JCDA
1.	Does your court sponsor a Junior or Juniorette court?
	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?
	be ONE outstanding project from the Junior or Juniorette Court. What was the goal for the Property? How many were involved? What impact did the activity have on your court, parish, or enity?
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.