



KNIGHTS OF COLUMBUS
IOWA
STATE COUNCIL
BIRTHRIGHT ACTIVITIES REPORT



THIS REPORTING FORM MUST BE COMPLETED BY EACH COUNCIL AND FORWARDED FOLLOWING THE BIRTHRIGHT ROSE DRIVE.

(Please type or print)

Council No. _____ District No. _____

Chairpersons Name _____

Area Code and Phone No. () _____

Date of Drive or other Activity _____

Amount of Monies Collected _____

Is this your first year for a Birthright Activity? Yes _____ No _____

Percentage of Council Members participating _____

Did your council have a Birthright speaker? Yes _____ No _____

Which Birthright Chapter did the monies go to? _____

Name of Town? _____

Did you do the Rose Drive? Yes _____ No _____

Did your Council do other Birthright Activities? _____

Explain here:

Signed: _____

(Grand Knight)

DO NOT SUBMIT THIS REPORT FORM TO THE SUPREME COUNCIL

Please feel free to list any comments or suggestions that you may have regarding the Birthright Rose Drive.

Deadline: March 15th

Mail form to State Pro-Life/Birthright Chairman

Michael J. Becker
509 3rd Avenue SE
LeMars, IA 51031-2407

