



**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: February 15<sup>th</sup>**

**Mail form to State Pro-Life/Birthright Chairman**

**Michael J. Becker**  
**509 3<sup>rd</sup> Avenue SE**  
**LeMars, IA 51031-2407**

