Local Council Annual Report

Catholic United Financial
3499 Lexington Avenue North, Saint Paul, MN 55126
651.490.0170 ● 800.568.6670 ● www.catholicunitedfinancial.org

Purpose:

- The purpose of the Local Council Annual Report is to inform Catholic United about the fraternal and community activities done by the local council. Catholic United submits the information to the American Fraternal Alliance to maintain our status as a not-for-profit financial services company.

Important Information:

- Please **include the Annual Financial Statement** with the **Annual Report** – The Council Treasurer has received the Annual Financial Statement in a separate mailing.
- It is the responsibility of the **Fraternal Secretary** to complete the annual report and the report must be received by February 15 of each year.
- Your council must complete the entire packet in order to receive the Catholic United activity allowance payments.
- Failure to submit a satisfactory report will cause your council to become inactive and **if an acceptable report is not submitted by the deadline,** the Fraternal Secretary will not receive the Fraternal Secretary Reimbursement.
- Make a copy of the completed report for your file.
- Contact the Fraternal Department if you have any questions or concerns (contact information is above). Email: fraternal@catholicunited.org.

Award Criteria:

Platinum Council	12 Activities (one being Join Hands Day), 4 Meetings	$3.00 per adult member
Gold Council	12 Activities, 4 Meetings	$3.00 per adult member
Silver Council	8 Activities, 4 Meetings	$2.50 per adult member
Active Council	4 Activities, 2 Meetings	$2.00 per adult member
Semi-Active Council	1 Activity, 1 Meeting	$1.00 per adult member

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Council Number: _____ Council Name: _____

City: _____ State: _____ Zip: _____

Catholic United Sales Representative: _____

Local Council Annual Report:

Name of Fraternal Secretary Completing the Local Council Annual Report: _____ Date: _____

Phone of Fraternal Secretary of Person Completing the Local Council Annual Report:

_____

Email of Fraternal Secretary Completing the Local Council Annual Report: _____

By signing, I certify that I have read and understand the information stated above.
Also, I certify that the information in the report is accurate to the best of my knowledge.

Signature of Fraternal Secretary Completing the Local Council Annual Report: _____

Report Summary

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The **Local Council Report Summary** gives the fraternal department the information we need to report on your council's activities to the American Fraternal Alliance. While you may not have data for each section, please be thorough so that we might receive valuable insight into what is important to our members. The Fraternal Secretary may have to contact the Council Treasurer to obtain some information.

1. Please state the total amount of funds generated by your council in the last fiscal year, including member donations, non-member donations and matched gifts by the Home Office. This might include:

   Activity Allowance from Home Office: $_____

   Money raised through council fundraising activities: $_____

   Funds matched by the Home Office or other source: $_____

   Other: _____ $_____

   Total of all the above: **$_____**

2. Please indicate the total cash amount donated to non-profit community-based organizations or individuals during this reporting period. This amount could include the cost of event organization, the cost of fund-raising activities and/or cash donations.

   Total amount invested in organizing community service events, including award banquets to celebrate community service: $_____

   Total dollars allocated to organization of fund-raising activities: $_____

   Total dollars donated to non-profit organizations: $_____
   (See activity log Question #8)

   Total scholarship dollars granted
   (i.e. matched funds on Post-high school tuition, World Youth Day, etc.) $_____

   - Were scholarships available to non-members? ☐ Yes ☐ No
   - # of scholarships: _____
   - Description of scholarship theme:_____
     _____
     _____
     _____

   Total of all of the above: **$_____**

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3. Please indicate the thematic areas that are the focus of council community service activities and fundraising (check all that apply):

☐	Seniors	☐	Affordable housing
☐	Environment	☐	Education
☐	Children & youth	☐	Local capacity-building
☐	Health & well-being	☐	Other _____

4. If your council gathers NON-MONETARY GOODS such as clothing, food, books or other items that may assist people in need, please provide the following information:

Amount of Clothing (approximate $ value): _____

Food (approximate $ value): _____

Books ($ value): _____

Other: _____ _____

Total of all the above: **$_____**

☐ No, the council did not gather non-monetary goods.

Activity Log

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The **Local Council Activity Log** is a detailed description of the activities of your council during 2011. This section will help the Fraternal Department determine your council's star status – so be sure to include EVERY activity, as your star status determines the amount of your activity allowance to be paid in 2012. Choose the *best* category for each activity and list each activity only once.

1. List your 2010 Council Star Status: _____

2. Which of the following **Fraternal Programs** has your council utilized?

☐ **MinisTREE**

☐ **Project Bonus & Bonus Plus**

- In order to receive the benefit of a "youth allotment," you must run a Project Bonus and/or Bonus Plus event and turn in the necessary completion form - either immediately after the event or included with this annual report. A copy of the form is attached (yellow).

☐ **Council Matching Grant** (please do not include Matching Grant Completion Forms with your annual report)

- How many matching grant events did you host? _____
- Offer a short description of the event(s):_____
  _____
  _____

☐ **Member Assistance** (please do not include Member Assistance Completion Forms with your annual report)

- Offer a short description of the event(s):_____
  _____
  _____

☐ **Project Multiply** (please do not include Project Multiply Completion Forms with your annual report)

- Offer a short description of the event(s):_____
  _____
  _____

☐ **Project Volunteer** (please do not include Project Volunteer Completion Forms with your annual report)

- Offer a short description of the event(s):_____
  _____
  _____

☐ **Join Hands Day**

- Offer a short description of the event:_____
  _____
  _____
- List all other organizations involved (i.e. Boy Scouts)
  _____
  _____
  _____

3. List the dates and attendance of your council meetings held during 2011
   (*It is not necessary to list more than 4 meetings*).

Date:_____ Attendance:_____ Date:_____ Attendance:_____

Date:_____ Attendance:_____ Date:_____ Attendance:_____

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4. If your local council participated in RELIGIOUS ACTIVITIES, please provide the following information *(For example: Vocation Sunday, Mass for deceased members, living rosary, attend a retreat together. NOTE: attending wakes and funerals count as one activity regardless of how many you attend)*:

   ☐ No, the council did not participate in religious activities.

   ☐ Yes, the council participated in religious activities. *Please fill out the necessary information below. Attach a separate sheet if necessary.*

Event	Date	Description	# members	# non-members

# of religious activities organized: _____

Total # of members involved: _____

Total # of non-members involved: _____

Funds spent on religious activities: $_____

Funds donated for religious activities: $_____

5. Please indicate how many fraternal SOCIAL EVENTS (council fellowship) occurred during the year *(Any social activity, such as breakfasts, lunches, or dinners during the year, each counts as a separate activity. However, having refreshments after a meeting does not count as an activity. For **Joint Installation of Council Officers**, the event counts as an activity for the hosting council only. It does not count as an activity for councils that attend the event.)*:

   ☐ No, the council did not participate in social activities.

   ☐ Yes, the council participated in social activities. *Please fill out the table below, attach a separate sheet if necessary.*

Event	Date	Description	# members	# non-members

# of social activities organized: _____

Total # of members involved: _____

Total # of non-members involved: _____

Council Number: _____ Council Name: _____

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6. Please provide the following information about volunteer community SERVICE ACTIVITIES organized by your council in this reporting period *(include all fundraising activities in this section that were not linked to a fraternal program; cleaning up the parish once a month throughout the entire year counts as one activity, not twelve)*:

☐ No, the council did not participate in service activities.

☐ Yes, the council did participate in service activities *Please fill out the table below, attach a separate sheet if necessary.*

Event	Date	Description	# members	# non-members

# of volunteer projects organized: _____

# of members involved: _____

# of non-member volunteers involved: _____

Total # of volunteer hours donated: _____

7. If your local council organized PATRIOTIC ACTIVITIES, please provide the following information:

☐ No, the council did not organize patriotic activities.

☐ Yes, the council did organize patriotic activities. *Please fill out the table below, attach a separate sheet if necessary.*

Event	Date	Description	# members	# non-members

# of activities: _____

# of members involved: _____

# of nonmembers involved: _____

Council Number: _____ Council Name: _____

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8. Does your council publish a NEWSLETTER, E-NEWSLETTER, or utilize some other form of council promotion *(i.e. FaceBook or Twitter)*? *(A council newsletter, e-newsletter, or other promotion counts as 1 activity regardless of how many are sent out each year.)*

☐ No ☐ Newsletter ☐ E-newsletter ☐ Other:_____

If yes, how many times was your newsletter/promotion sent this year? _____

Total number of newsletters/promotions sent : _____

Please Note: Please send copies to the Fraternal Department when they are sent to the members. We like to be kept in the loop!

9. Please indicate the organizations that your council has DONATED to **(check all that apply)**:
Up to two donations may be counted as activities. If your council wants to donate to a specific local charity, please discuss this in advance with your Fraternal Liaison and indicate below.

_____ Rev. Msgr. Schuler Charitable Trust
_____ Catholic United Financial Foundation
_____ Catholic Defense League
_____ Diocesan Family Life Offices
_____ Sharing and Caring Hands
_____ NET (National Evangelization Teams) Ministries
_____ YTM (Youth in Theology and Ministry)
_____Birthline (www.birthline.org)
_____Other Local Donation _____

9. Did your local council offer individual or family EDUCATIONAL PROGRAMMING as council activity?
Educational programming includes an Estate Planning Workshop, Young Adult Financial Workshop, etc.

☐ No, the council did not offer educational programming.

☐ Yes, the council did offer educational programming. *Please fill out the table below, attach a separate sheet if necessary.*

Event	Date	Description	# members	# non-members

# of workshops: _____

# of members involved: _____

# of non-members involved: _____

Council Number: _____ Council Name: _____

Local Council Stories

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1. Please share the three best stories about the community benefits resulting from the activities that were organized by your council during this reporting period. Please include any examples of press, publicity, and picture from the event. *Stories may be used for Our Catholic Journey, the Catholic United website, and other marketing initiatives*.

   (Please attach extra sheets if needed)

   - First Story:

   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____

   - Second Story:

   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____
   _____

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- Third Story:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

- Additional Notes:

_____

_____

_____

_____