



**Local Court Chairman to State Chairman
Catholic Daughters of the Americas®
QUALITY OF LIFE
Circle of Love Reporting Form
February 1, 2024 – February 1, 2025**

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: Theresa Steve, P.O. Box 33, Wilmont, MN 56185

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 chairperson.