

# 2005-2007 "Into Your Hands..." Ohio State Program Report

## COMMUNITY ACTIVITIES PROGRAM

<b>Reports Must Be Postmarked No Later Than The First Day Of The Next Reporting Period Except April; September 1, November 1, January 1, March 1 And April 15.</b> <b>Please Note: Reports Received After April 20 Will Not Qualify For Program Points.</b>  <b>"Councils Must Report 6 Activities To Max The Program And Receive 150 Points"</b>	<b>Council #</b>  <hr style="width: 80%; margin: 0 auto;"/> <b>Division</b> 1 2 3 4 5	<input type="checkbox"/> Jul-Aug <input type="checkbox"/> Sep-Oct <input type="checkbox"/> Nov-Dec <input type="checkbox"/> Jan-Feb <input type="checkbox"/> Mar-Apr
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Report On Both "Mandatory" Activities Below For 50 pts	Activity Date	Pts	Awarded
<b>Activity #12: Volunteer Of The Year</b> Submit council nomination to state director by April 1 with this form.		25	
<b>Activity #13: Care For Our Less Fortunate Friends</b> Organize and coordinate a significant display of positive charitable acts of service.		25	

Report On A Minimum Of 3 Out Of The 7 Activities Below For 75 pts			
<b>Activity #14: Keep Your Town Beautiful</b>		25	
<b>Activity #15: Patriotism For Ourselves And Our Country</b>		25	
<b>Activity #16: Support Of Our Special Friends</b>		25	
<b>Activity #17: Honoring Our Veterans</b>		25	
<b>Activity #18: Honor Fire, Police or Emergency Personnel;  Blue Coat Of The Year</b> Submit council nomination to state director by April 1 with this form.		25	
<b>Activity #19: Support and Assistance To Our Senior Citizens</b>		25	
<b>Activity #20: Council Choice</b>		25	

Report On 1 Out Of The 2 Activities Below For 25 pts			
<b>Activity #21: Annual March For Life</b>		25	
<b>Activity #22: Pro-Life Support</b>		25	

<u><b>Description Of Activity</b></u> (Number of council members/families participating, Total participants, Details and success of activity)

<u><b>Director's Comments:</b></u>  	<b>Mail White &amp; Yellow Copies To:</b>  <b>Retain Pink Copy For Council Files.</b>	<b>Mark S. Pickard</b> <b>State Community Director</b> 21500 Anderson Road Bowling Green, Ohio 43402 419-833-1655 pick854@aol.com
--------------------------------------------	---------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------

**Attach Additional And Supporting Documentation To Qualify For The State And Divisional Best Activity Awards**

Submitted By: \_\_\_\_\_ Tel: \_\_\_\_\_ Date: \_\_\_\_\_