

**Community Service District Annual Report
2009-2010
Due to Department Chairman by April 15, 2010**

District _____ Total Number of Units in District _____ Total Unit Reporting _____

Please report which programs your Unit participated in, the amount of money spent and the number of hours volunteered.

Name of Program	# of Units	\$ Amount Spent	Hours Volunteered
Adopt a Highway	_____	_____	_____
Army Community Covenant Program	_____	_____	_____
Blood Donation	_____	_____	_____
CERT Train the Trainer	_____	_____	_____
Community Support for Our Troops	_____	_____	_____
Community Beautifications	_____	_____	_____
Domestic Violence Centers	_____	_____	_____
Food Banks	_____	_____	_____
Habitat for Humanity	_____	_____	_____
Homeless Shelters	_____	_____	_____
Loaning of Medical Equipment	_____	_____	_____
Make a Difference Day	_____	_____	_____
Martin Luther King Jr. Day	_____	_____	_____
Organ and Tissue Donation	_____	_____	_____
Recycling	_____	_____	_____
Senior Citizens Centers/Nursing Homes	_____	_____	_____
Individual Community needs (List Programs below)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Submit additional details on the back of this sheet or on a separate sheet of paper.

District Community Service Chairman

Send one Copy to: Pam Lajewski-Pearson, Dept. Chairman
12 Blueridge St.
Marquette, Mi. 49855

All contest entries MUST be accompanied by a GREEN Sheet

Keep a copy for your Files