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This report is based on calendar year **JAN. 1 THROUGH DEC. 31, 2021**

****SUBMIT BEFORE MARCH 1, 2022****

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Local council information:

Council Number:

Council Name:

City/Town:

State/Province:

Country:

Email:

Person completing this report:

Which Regional Council do you belong to?

- | | | |
|---|---|---|
| <input type="checkbox"/> ACT-UCT Dominion | <input type="checkbox"/> Ky.-Va.-W.Va.-Md.-D.C. | <input type="checkbox"/> New York |
| <input type="checkbox"/> Arkansas-Oklahoma-Missouri | <input type="checkbox"/> Manitoba-Saskatchewan | <input type="checkbox"/> Ohio-Pennsylvania |
| <input type="checkbox"/> Atlantic | <input type="checkbox"/> Michigan | <input type="checkbox"/> Oregon-Washington-British Columbia |
| <input type="checkbox"/> California-Nevada-Arizona | <input type="checkbox"/> Minnesota-North Dakota | <input type="checkbox"/> Southeastern |
| <input type="checkbox"/> Colorado-Wyoming | <input type="checkbox"/> Mississippi-Louisiana | <input type="checkbox"/> South Dakota |
| <input type="checkbox"/> Illinois | <input type="checkbox"/> Montana-Utah-Idaho | <input type="checkbox"/> Texas |
| <input type="checkbox"/> Indiana | <input type="checkbox"/> Nebraska-Kansas | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Iowa | <input type="checkbox"/> New England | |

UCT Local Council Activity Report 2021 – Submit by MARCH 1, 2022

Please complete the form by providing details about community service projects (including cancer, youth, intellectual disabilities and safety) your local council engaged in during 2021. For projects repeated throughout the year, please list the project once with total numbers.

Project 1

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 2

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 3

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 4

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

UCT Local Council Activity Report 2021 – Submit by MARCH 1, 2022

Please complete the form by providing details about community service projects (including cancer, youth, intellectual disabilities and safety) your local council engaged in during 2021. For projects repeated throughout the year, please list the project once with total numbers.

Project 5

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 6

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 7

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 8

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

UCT Local Council Activity Report 2021 – Submit by MARCH 1, 2022

Please complete the form by providing details about community service projects (including cancer, youth, intellectual disabilities and safety) your local council engaged in during 2021. For projects repeated throughout the year, please list the project once with total numbers.

Project 9

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 10

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 11

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

Project 12

Cancer Intellectual Disabilities Safety Youth Miscellaneous

Charity/Organization benefited: _____

Number of members involved: _____

Total hours spent on project: _____

Total dollars given to this cause/project: _____

Number of people benefited: _____

Project description: _____

UCT Local Council Activity Report 2021 – Submit by MARCH 1, 2022

DONATIONS MADE TO: (Do not include donations reported in the projects section.)

UCT Charities (total \$): _____

UCT Fraternal Fund (total \$): _____

Ann Marshall Scholarship Program (total \$): _____

Bridges of Friendship Award (total \$): _____

1. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

2. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

3. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

4. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

5. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

6. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

7. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

UCT Local Council Activity Report 2021 – Submit by MARCH 1, 2022

8. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

9. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

10. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

11. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

12. Other donations made to: (Do not include donations reported in the projects section.)

Cause/Charity: _____

Total \$: _____

FRATERNAL/SOCIAL ACTIVITIES

Please list total activities and hours engaged in fraternal/social activities and associated total expenditures.

Activities may include: Council meetings, special dinners, leadership training, happy hours, holiday parties, Friendship Dinners, UCT Open Houses, elections, member recognition presentation.

Total number of Fraternal/Social events: _____

Total number of Fraternal/Social hours: _____

Total amount of Fraternal/Social expenditures (\$): _____