

LUSO-AMERICAN FINANCIAL

A Fraternal Benefit Society

Annual Reporting Booklet

For year: _____

3rd Quarter

(July, August, September)

Submit 3rd Quarter Packet by: October 15th

Council/Lodge #: _____

Council/Lodge City& State: _____

*****This booklet must be completed by every Council/Lodge to maintain active status*****



Return Booklet to:

Luso-American Financial

(West Coast Councils) 7080 Donlon Way, Suite 200, Dublin, CA 94568
(East Coast Lodges) 128 Union Street, Suite 203, New Bedford, MA 02746
or fill out forms online at www.luso-american.org



LUSO-AMERICAN FINANCIAL

Quarterly Council/Lodge Report

1. To maintain active status, each council/lodge must complete this form and return it to the Home Office at the end of each quarter, regardless of activity level.
2. Return it by:

First Quarter (Jan./Feb./Mar.)	Due by April 15 th
Second Quarter (Apr./May/June)	Due by July 15 th
Third Quarter (July/Aug./Sept.)	Due by October 15 th
Fourth Quarter (Oct./Nov./Dec.)	Due by January 15 th
3. To qualify for the 5 Star program, completed forms must be received by the applicable deadline.

Reporting Period: _____ 1st Quarter _____ 2nd Quarter _____ 3rd Quarter _____ 4th Quarter

Adult Youth 20-30's Council/Lodge No.: _____

Council/Lodge City & State: _____

Quarterly Report Submitted by: _____

Secretary or Youth Directors Name

MEETINGS

Report council/lodge meetings only (time spent addressing council/lodge business; exclude time spent for social activity, etc.) Social time should be included on the following page). Council/Lodge should have at least two meetings per quarter. To include your meeting minutes, please include on a separate sheet of paper and submit with packet. **20 pts. per meeting (max 80 points per quarter)**

Date of Meeting	Location of Meeting City and State	No. of Attendees	Length of Meeting Time Started & End	Meeting Minutes Included w/ Report
				Submit minutes for each meeting on a separate sheet of paper
				Submit minutes for each meeting on a separate sheet of paper
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Quarterly Council/Lodge Report

COUNCIL/LODGE ACTIVITIES

Only report events completed by your Council/Lodge (Social, Fundraisers, etc...).

10 pts. per event (max 30 points per quarter)

Date of Event	Total No. of Attendees	Type of Event	Description of Event
	_____ Adults _____ Youth _____ 20-30's	<input type="checkbox"/> Pizza Party <input type="checkbox"/> Dance <input type="checkbox"/> Fundraiser <input type="checkbox"/> BBQ/Picnic <input type="checkbox"/> Parade <input type="checkbox"/> Camping <input type="checkbox"/> Other _____	
	_____ Adults _____ Youth _____ 20-30's	<input type="checkbox"/> Pizza Party <input type="checkbox"/> Dance <input type="checkbox"/> Fundraiser <input type="checkbox"/> BBQ/Picnic <input type="checkbox"/> Parade <input type="checkbox"/> Camping <input type="checkbox"/> Other _____	
	_____ Adults _____ Youth _____ 20-30's	<input type="checkbox"/> Pizza Party <input type="checkbox"/> Dance <input type="checkbox"/> Fundraiser <input type="checkbox"/> BBQ/Picnic <input type="checkbox"/> Parade <input type="checkbox"/> Camping <input type="checkbox"/> Other _____	
	_____ Adults _____ Youth _____ 20-30's	<input type="checkbox"/> Pizza Party <input type="checkbox"/> Dance <input type="checkbox"/> Fundraiser <input type="checkbox"/> BBQ/Picnic <input type="checkbox"/> Parade <input type="checkbox"/> Camping <input type="checkbox"/> Other _____	



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Quarterly Council/Lodge Report

COUNCIL/LODGE COMMUNITY SERVICE LOG

(Religious, Charitable and Other Organizations)

Only report Community Service completed by your Council/Lodge.

20 pts. per event (max 60 points per quarter)

Date of Event	Total No. of Volunteers	Total No. of Volunteer Hours	Description of Event
	_____ Adults _____ Youth _____ 20-30's		<input type="checkbox"/> Visit Nursing Home <input type="checkbox"/> Food For the Needy <input type="checkbox"/> Meal Delivery <input type="checkbox"/> Helped at Charitable Fundraiser <input type="checkbox"/> Worked on Fundraiser for Fraternal Cause <input type="checkbox"/> Other _____
	_____ Adults _____ Youth _____ 20-30's		<input type="checkbox"/> Visit Nursing Home <input type="checkbox"/> Food For the Needy <input type="checkbox"/> Meal Delivery <input type="checkbox"/> Helped at Charitable Fundraiser <input type="checkbox"/> Worked on Fundraiser for Fraternal Cause <input type="checkbox"/> Other _____
	_____ Adults _____ Youth _____ 20-30's		<input type="checkbox"/> Visit Nursing Home <input type="checkbox"/> Food For the Needy <input type="checkbox"/> Meal Delivery <input type="checkbox"/> Helped at Charitable Fundraiser <input type="checkbox"/> Worked on Fundraiser for Fraternal Cause <input type="checkbox"/> Other _____
	_____ Adults _____ Youth _____ 20-30's		<input type="checkbox"/> Visit Nursing Home <input type="checkbox"/> Food For the Needy <input type="checkbox"/> Meal Delivery <input type="checkbox"/> Helped at Charitable Fundraiser <input type="checkbox"/> Worked on Fundraiser for Fraternal Cause <input type="checkbox"/> Other _____



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DONATION TO OTHERS:

Funds donated to charity, community agencies, religious organizations, youth organizations, scholarships, etc. Include approximate value of food baskets, clothing, supplies, etc. If you wish to do a matching funds donation, please get form located the forms section. The matching funds form must be filled out and submitted to the home office along with copy of check donation.

Date of Donation	Donation to	Value of Donation	Describe your donation
			<input type="checkbox"/> Monetary <input type="checkbox"/> Food Basket <input type="checkbox"/> Other _____
			<input type="checkbox"/> Monetary <input type="checkbox"/> Food Basket <input type="checkbox"/> Other _____
			<input type="checkbox"/> Monetary <input type="checkbox"/> Food Basket <input type="checkbox"/> Other _____
			<input type="checkbox"/> Monetary <input type="checkbox"/> Food Basket <input type="checkbox"/> Other _____

PRESIDENTS VISIT

Only fill out if you had your president's visit during this quarter.

200 points for a free visit – 100 points for a paid visit

400 points if you do a joint president's visit with another Adult council/lodge. A Council/Lodge who doesn't have another council or lodge within 50 miles from them will receive an additional 100 points.

Date of Visit: _____ Location of Visit: _____

Mark one with an X: Free Visit: _____ Paid Visit: _____ Joint Visit w/ other council/lodge: _____
 List council/lodge: _____

How many in attendance: _____ Adults _____ Youth _____ 20-30's

Details: _____

FOR HOME OFFICE USE ONLY

Received by: _____ Date: _____ Total Points Received for Quarter: _____

Meeting Points: _____ Activity Points: _____ Community Service Points: _____