DISTRICT BISHOP’S DAY REPORT

DISTRICT: ________________________________________________

DIST. PRESIDENT: _________________________________________

*BISHOP: ___________________________________________________________________________________________________

DATE: __________________________LOCATION: _______________________________

*DIST. CHAPLAIN: ______________________________________HOST BR: ______________________________

HOST BR. PRES: __________________________*PASTOR/BR. CHAPLAIN: __________________________

EVENT CHAIR: __________________________CO-CHAIR: __________________________

Spiritual Bouquet: __________________________Presented by: __________________________

Seminary Burse Donation of $________________________Presented by: __________________________

Providenza Donation of $________________________Presented by: __________________________

*if present. If the Bishop did not attend, please indicate who accepted on his behalf.

SPECIAL GUESTS (Central Council Members, Clergy, Other)

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____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Brief Description of Event/Comments:

____________________________________________________________________________________

____________________________________________________________________________________

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____________________________________________________________________________________

Photo (s) Included □ To Follow □ Publish W/O Photos □

ATTENTION DISTRICT PRESIDENT: Please use this form to report to the Bollettino on your Bishop’s Day. Please complete and submit the report (or designate a District or Branch Correspondent to do so) after the event. If available, include one or more photographs with principals clearly named. Material received by the 10th of the month will be published in the front section of the subsequent month’s Bollettino. Please do not provide more information than that requested. You may provide more comprehensive coverage and acknowledgements, if you wish, in your monthly District Report. Thank you.

PLEASE MAKE COPIES OF THIS FORM AND SAVE FOR FUTURE USE.