ITALIAN CATHOLIC FEDERATION

APOSTOLATE CHARITY REPORT

2022

JULY 1, 2021 THRU JUNE 30, 2022

ALL BRANCHES: Please submit this report by **July 7th** to the:

I.C.F. OFFICE
8393 CAPWELL DRIVE, SUITE 110
OAKLAND, CA 94621
(510) 633-9058 ●Toll Free 1-888-423-1924
Web Site: www.icf.org ● E-mail: info@icf.org

District:_____   Br.#/City:_____

Br. President:_____   Phone: (_____)_____

Apostolate Chairperson:_____   Phone: (_____)_____

Diocese of:_____

Number of Members as of June 30th:

APOSTOLATE CHARITY REPORT

PART I. (For information only).

1. Did your Branch submit an Apostolate/Charity report last year?   YES   NO
   If no, why not? _____

2. Does your Branch have an Apostolate Chairperson?   YES   NO
   Name of Chairperson _____

3. Is an Apostolate report given at each monthly meeting?   YES   NO

4. Does the Branch Chaplain attend many of the meetings?   How many meetings: _____

5. Is it customary for your Branch to attend Mass together?   YES   NO

   Monthly _____ Quarterly _____ Semi-Annually _____ Annually _____

6. Do your members, as a Branch, recite the rosary or pray for
   special intentions?   YES   NO

7. Does your Branch offer Mass for deceased members?   YES   NO

8. Does your Branch contribute to the Providenza Seminary Fund?   YES   NO

9. Does your Branch attend Branch/District sponsored: YES   NO

   Retreats _____ Pilgrimages _____ Day/Night of Recollection _____

   Other Special Event (s) _____

10. Did your Branch attend Bishop's Day last year?   YES   NO
    About how many persons attended? _____

    Please estimate about how many of your members perform the following duties:

    Mass Greeters_____ Lectors_____ Eucharistic Ministers_____ Sacristans_____
    Ushers_____ Choir Members_____ CCD Teachers_____ Deacons_____

    Other Services (such as making lap robes, serving at soup kitchens, etc.)

    _____

    _____

    _____

    _____

    _____

CHARITY DONATIONS

PART II.

PLEASE NOTE THE FOLLOWING:

(A) Only Monetary Donations may be reported.
(B) All reported donations must go through the Branch Treasury.
(C) Please enter the total at the end of the column.
(D) Acceptable donations include donations to I.C.F. Charities, Parish Charities and/or Community Charities.

1.   DONATION RECIPIENT_____ AMOUNT_____
_____

2.   DONATION RECIPIENT_____ AMOUNT_____
_____

3.   DONATION RECIPIENT_____ AMOUNT_____
_____

4.   DONATION RECIPIENT_____ AMOUNT_____
_____

5.   DONATION RECIPIENT_____ AMOUNT_____
_____

6.   DONATION RECIPIENT_____ AMOUNT_____
_____

7.   DONATION RECIPIENT_____ AMOUNT_____
_____

8.   DONATION RECIPIENT_____ AMOUNT_____
_____

9.   DONATION RECIPIENT_____ AMOUNT_____
_____

10. DONATION RECIPIENT_____ AMOUNT_____
_____

11. DONATION RECIPIENT_____ AMOUNT_____
_____

12. DONATION RECIPIENT_____ AMOUNT_____
_____

TOTAL: _____

IGNEM VENI MITTERE