

**STATE COUNCIL
CABRILLO CIVIC CLUBS OF CALIFORNIA, INC.**

SUBORDINATE CLUB REPORT
(Please submit in triplicate)

Subordinate Club Name & Number _____

Report of Activities Covering the Months of:

Jan/Feb/Mar _____ Apr/May/Jun/Jul/Aug/Sep _____ Oct/Nov/Dec _____

AMERICANIZATION

Chairperson: _____

Number of Naturalization Ceremonies & Programs Attended: _____

How does the club publicize Americanization: _____

Number of Members who volunteer in patriotic and veteran organizations: _____

How does the club celebrate patriotic events: _____

ALL SPORTS

Chairperson: _____

Money Raised: \$ _____

CIVIC AFFAIRS

Chairperson: _____

Volunteer Hours (Hours Only): _____

Monetary Donations (Amount of Money Only): \$ _____

SCHOLARSHIP

Chairperson: _____

Number of Schools Receiving Applications: _____

Number of Schools Visited: _____

Amount of Money for Scholarship(s): Regular \$ _____ **Memorial \$** _____

MEMBERSHIP

Current Year to Date:

Active Paid _____ **Affiliate Paid(25% Limit)** _____ **PSP** _____ **Total** _____

Honorary _____ **Student** _____

Last Year Same Date:

Active Paid _____ **Affiliate Paid(25% Limit)** _____ **PSP** _____ **Total** _____

Honorary _____ **Student** _____

BANK BALANCE

Checking \$ _____ **Savings \$** _____ **Scholarship \$** _____

Long-Term Savings \$ _____

SUGGESTIONS: (Subordinate Club to State Council)

Respectfully Submitted:

State Director
Revised October, 2008