

State Council Program Awards

Entry Form

THIS REPORTING FORM MUST BE COMPLETED BY EACH COUNCIL AND FORWARDED TO THE STATE COUNCIL.

(A separate reporting form should be completed for each program category.)

CATEGORY (MARK ONE): Faith Family Community Life



COUNCIL INFORMATION:

1 Council Number: 11934 Total Council Members: 102
Grand Knight: Ned Darbonne E-Mail: neddar53@gmail.com

PROGRAM INFORMATION (complete all sections):

2 Program Title: Life - ASAP Program Date: 10-16-22
Participation: $\frac{10}{\text{Members}} + \frac{50}{\text{Non Members}} = \frac{60}{\text{Total Participants}}$ $\frac{60}{\text{Total Participants}} \times \frac{1}{\text{Hours}} = \frac{60}{\text{Total Volunteer Hours}}$
Program Planning: _____ & _____ Members Recruited: _____ Donations: \$4,206
Costs Time Local Currency

3 Describe program in detail. Use additional paper if necessary. Supplementary material may be submitted along with the nomination. Accompanying materials can include letters, testimonials, news clippings, photographs, pamphlets, etc. Do not submit tapes, videocassettes, DVD's, display materials, films, etc., as they will not be considered in judging the nomination.

3a) In the space provided below, briefly describe the purpose and goals of this program. This section must be completed.

The council held a drive for ASAP (Aid and Support After Pregnancy) at St. Joseph Parish in Gluckstadt. We setup cribs and pack-n-plays at the Church doors to collect donated items and also collected cash donations. We believe we were one of the first councils to act on this new program instituted by Supreme.
Also, in addition to ASAP, but not included in the total above were council donations to the Ultrasound Program (\$200), MS Pro-Life Memorial Fund (\$200), and an addition \$100 ASAP donation to be included in "Pass-the-Hat" initiative at State Convention. The council also leads a monthly rosary for life in the parish Mary Garden.

DO NOT SUBMIT THIS REPORT FORM TO SUPREME COUNCIL

**ENTRY MUST BE RECEIVED BY THE STATE COUNCIL
TO BE ELIGIBLE FOR THE COMPETITION**

MAIL ORIGINAL TO: State Deputy or State Program Director

COPY TO: Council File

Available in electronic format at www.kofc.org



(continued on reverse)

3b) Whom does this program benefit?

We distributed baby formula, diapers, wipes, clothes, furniture and misc. items to 2 pregnancy support centers - also donated \$1,000 each to these facilities - total donations (including estimates for donated items) included:

1. Catholic Charities (Born Free/New Beginnings) - ~\$2,811
2. Center for Pregnancy Choices - ~\$1,395

In addition to the donations and cash received, the council submitted ASAP matching funds request to Supreme which are also donated to the facilities (those amounts not included in the total above).

3c) What problem or need did this program resolve?

ASAP is a new program initiated by Supreme to address the need resulting from the overturning of Roe-vs-Wade to assist pregnant women in need.

3d) Why did the council select this program?

Many pregnant women need assistance to care for themselves and their babies. They deserve help for making the right choice in keeping their babies.

3e) Describe the success of the program:

The program was a huge success. Both pregnancy centers who received the donations were overwhelmed by the charity of our Council/Parish. At the time, Catholic Charities had 20 women living on campus.

Attest: Guy J. Heying State Deputy Signed: Harrison (Ned) Darbonne Grand Knight Date: 03/23/2023