

**Catholic Daughters of the Americas**  
**National Headquarters**



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September 25, 2019

Worthy Circle of Love Chairman,

I want to personally thank you for accepting the challenge and the position of Court Chairman for the Circle of Love Program for 2018 – 2020.

Attached please find a copy of this year's forms. Please be sure to ask your State Regent for the name and address of the State Chairman if it is not already on the form.

Please note the following guidelines for reporting on these forms:

- You should file the report for the two-year period of February 1, 2018, to February 1, 2020.
- As court chairman, please select **ONE** outstanding or unique event in which your court participated in your specific area of the Circle of Love and send it to the state for consideration and recognition. Be sure to include a completed cover sheet, "**LOCAL Chairman to State Chairman.**"
- In addition to mailing it to the State Chairman, please keep a copy of the cover sheet and entry for your court files.
- Remember: your submission must go through the state. Do **not** mail submissions directly to the national chairman.

Please encourage your court to participate in your spoke of the Circle of Love Program.

Thank you for your dedicated service to our organization and to our Church through the Catholic Daughters of the Americas.

In Unity and Charity,

A handwritten signature in cursive script that reads "Olga Z. Samaniego".

Olga Samaniego, National



Local Court Chairman to State Chairman  
Catholic Daughters of the Americas®  
**LEADERSHIP**

Circle of Love Reporting Form  
February 1, 2018 – February 1, 2020

Due to local Regent by Feb 15 Due to State Chairman March 1, 2020

Court Name \_\_\_\_\_ Number \_\_\_\_\_

Regent \_\_\_\_\_ Local Chairman \_\_\_\_\_

Number of Members \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name Charlotte Hoverstadt

Address 43650 142<sup>nd</sup> ST City Webster

State SD 57274 Email charhov@itctel.com

Title of the Project \_\_\_\_\_

Describe **fully ONE project** in the **Circle of Love** program for **Leadership** completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.





**Local Court Chairman to State Chairman  
Catholic Daughters of the Americas®  
FAMILY**

**Circle of Love Reporting Form  
For February 1, 2018 – February 1, 2020**

**Due to local Regent Feb 15, Due to State Chairman 3/1/2020**

Court Name \_\_\_\_\_ Number \_\_\_\_\_

Regent \_\_\_\_\_ Local Chairman \_\_\_\_\_

Number of Members \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name Gloria Bauske \_\_\_\_\_

Address 48508 277<sup>th</sup> ST \_\_\_\_\_ City Flandreau \_\_\_\_\_

State SD 57028 \_\_\_\_\_ Email gloriak@iw.net \_\_\_\_\_

Title of the Project \_\_\_\_\_

Describe **fully ONE project** in the **Circle of Love** program for **Family** completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.



**Local Court Chairman to State Chairman**  
**Catholic Daughters of the Americas®**  
**QUALITY OF LIFE**  
**Circle of Love Reporting Form**  
**February 1, 2018 – February 1, 2020**

**Due to local Regent by Feb 15. Due to State Chairman by March 1, 2020**

Court Name \_\_\_\_\_ Number \_\_\_\_\_

Regent \_\_\_\_\_ Local Chairman \_\_\_\_\_

Number of Members \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name Mary Althoff \_\_\_\_\_

Address 2600 E 33<sup>rd</sup> ST \_\_\_\_\_ City Sioux Falls \_\_\_\_\_

State SD 57301 \_\_\_\_\_ Email mary.althoff@gmail.com

Title of the Project \_\_\_\_\_

Describe **fully ONE project** in the **Circle of Love** program for **Quality of Life** done by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.



Local Court Chairman to State Chairman  
Catholic Daughters of the Americas®  
**SPIRITUAL ENHANCEMENT**  
Circle of Love Reporting Form  
February 1, 2018 – February 1, 2020

**Due to local Regent by Feb 15 Due to State Chairman by March 1, 2020**

Court Name \_\_\_\_\_ Number \_\_\_\_\_

Regent \_\_\_\_\_ Local Chairman \_\_\_\_\_

Number of Members \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name Patty Fuegen \_\_\_\_\_

Address 1310 W 2<sup>nd</sup> ST Redfield \_\_\_\_\_

State SD 57469 \_\_\_\_\_ Email fuegenpatty@gmail.com

Title of the Project \_\_\_\_\_

Describe **fully ONE project** in the **Circle of Love** program for **Spiritual Enhancement** completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.



Local Court Chairman to State Chairman  
Catholic Daughters of the Americas®  
**EDUCATION**  
Circle of Love Reporting Form  
February 1, 2018 – February 1, 2020

Due to local Regent by Feb 15 Due to State Chairman March 1

Court Name \_\_\_\_\_ Number \_\_\_\_\_

Regent \_\_\_\_\_ Local Chairman \_\_\_\_\_

Number of Members \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name Sally Dolan \_\_\_\_\_

Address 47152 298<sup>th</sup> ST \_\_\_\_\_ City Beresford \_\_\_\_\_

State SD 57004 \_\_\_\_\_ Email sjcdolan@gmail.com \_\_\_\_\_

Title of the Project \_\_\_\_\_

Describe **fully ONE project** in the **Circle of Love** program for **Education** completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.



Local Court Chairman to State Chairman  
Catholic Daughters of the Americas®  
**LEGISLATION**  
Circle of Love Reporting Form  
February 1, 2018 – February 1, 2020

Due to local Regent by Feb 15 Due to State Chairman March 1, 2020

Court Name \_\_\_\_\_ Number \_\_\_\_\_

Regent \_\_\_\_\_ Local Chairman \_\_\_\_\_

Number of Members \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name Kathy Feuerhelm

Address 504 N Maple AV City Brandon

State SD 57005 Email feuerhelm@alliancecom.net

Title of the Project \_\_\_\_\_

Describe **fully ONE project** in the **Circle of Love** program for **Legislation** completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.





Local Court to State Chairman  
Catholic Daughters of the Americas®

**YOUTH / JCDA**

**Circle of Love Reporting Form**

February 1, 2018 – February 1, 2020

**Due to local Regent by Feb 15 Due to State Chairman by March 1, 2020**

Court Name \_\_\_\_\_ Number \_\_\_\_\_

Regent \_\_\_\_\_ Local Chairman \_\_\_\_\_

Number of Members \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Local Court Chairman: Please fill out this form (Print/Type) and mail to:

State Chairman: Name Sherri Fuchs \_\_\_\_\_

Address 29640 389<sup>th</sup> AV \_\_\_\_\_ City Wagner \_\_\_\_\_

State SD \_\_\_\_\_ 57380 \_\_\_\_\_ Email sherrifuchs@hotmail.com \_\_\_\_\_

**Part I: YOUTH**

Title of the Project \_\_\_\_\_

Describe **fully ONE project** in the **Circle of Love** program for **Youth** completed by your court this past year. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.



**Local Court Chairman to State Chairman  
Catholic Daughters of the Americas®  
YOUTH / JCDA  
Circle of Love Reporting Form  
February 1, 2018 – February 1, 2020**

**Due to local regent by Feb 15 Due to State Chairman by March 1, 2020**

Court Name \_\_\_\_\_ Number \_\_\_\_\_

**Part II: JCDA**

1. Does your court sponsor a Junior or Juniorette court?
2. If you answered no to the above question, are you planning on starting one soon?  
Please include details.
3. If you answered yes, please answer the following questions.
4. What is the name of the Junior court and how many members are in the court?
5. What is the name of the Juniorette court and how many members are in the court?

Describe ONE outstanding project from the Junior or Juniorette Court. What was the goal for the activity? How many were involved? What impact did the activity have on your court or parish?

**Title of the Project** \_\_\_\_\_

**Please use the back of this page or additional sheets if necessary. Thank you for completing this report. We suggest that you keep a copy to pass on to the next chairman.**