

FRATERNAL PROGRAMS REPORT FORM

Reporting Officer Name: Christopher Szalkowski Membership Number: 5498385

Council Number: 12524 Date(s) of Program 10 / 2 / 2025 to 10 / 23 / 2025

State / Province: MD

1	Faith	Family	Community	Life
	☐ Into the Breach ☐ Pilgrim Icon Program ☐ Build the Domestic Church Kiosk ☐ Rosary ☐ Spiritual Reflection ☐ Holy Hour ☐ Sacramental Gifts ☐ RSVP ☐ Other	☐ Family of the Month ☐ Keep Christ in Christmas ☐ Family Fully Alive ☐ Family Week ☐ Consecration to the Holy Family ☐ Family Prayer Night ☐ Good Friday Family Promotion ☐ Food for Families ☐ Other	☐ Disaster Preparedness ☐ Free Throw Championship ☐ Soccer Challenge ☐ Helping Hands ☐ Catholic Citizenship Essay Contest ☐ Coats for Kids ☐ Global Wheelchair ☐ Habitat for Humanity ☐ Other	☐ Christian Refugee Relief ☐ Silver Rose ☐ Pregnancy Center Support/ASAP ☐ Novena for Life ☐ Mass for People with Special Needs ☐ March for Life ☐ Special Olympics ☐ Ultrasound Initiative ☒ Other

If Other, Program Name: Volunteer work at the Columbia Pregnancy Center

2 Participants including Volunteers: 1

Members Recruited: 0

3 Total Volunteer Hours: 12

Donations: 0

4 Did you meet feature program requirements? ☒ Yes ☐ No

Please describe your program/event:

Volunteer efforts at the Columbia Pregnancy Center. Greeted clients. Performed administrative support work.

