**2024 Report of PA Subordinate Family Activities Chairman**

Grange Name & Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pomona Name & Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Region\_\_\_\_\_\_\_\_\_\_\_\_

Subordinate FA Chairman Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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This form is used to determine your eligibility for a Certificate of Merit. Please remember that the **reports must be filled out completely to be eligible.**

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**Requirements: 2 points for questions 1 thru 7**

1. Did you hold a planning meeting? Yes\_\_\_\_\_\_ No\_\_\_\_\_

2. Did you participate in the Cancelled Stamp program? Yes\_\_\_\_\_ No\_\_\_\_\_

3. Did you or any of your committee attend any State sponsored Grange activities or

events? Yes\_\_\_\_\_ No\_\_\_\_\_

4. Did you report at meetings and cooperate with other officers? Yes\_\_\_\_\_ No\_\_\_\_\_

5. Did you give health and safety tips and share patterns and recipes with your reports

at those meetings? Yes\_\_\_\_\_ No\_\_\_\_\_

6. Have you tried any new projects in your grange? Yes\_\_\_\_\_ No\_\_\_\_\_

7. Did you complete the annual report and submit it on time to your State Family

Activities Director by September 15th. Yes\_\_\_\_\_ No\_\_\_\_\_

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**2 points for answers to questions 1 thru 4**

1. How many members are there in your Subordinate Grange? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Did you attend your Subordinate meetings regularly? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Did you have entries in the State Family Activities Contests?

Yes\_\_\_\_\_ How many\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_

4. Do you invite non-members to participate in your projects (not contests)?

Yes\_\_\_\_\_ No\_\_\_\_\_

**3 points for answer to question 5:**

5. Please tell us about any projects/events/activities that the Subordinate FA chairman

was responsible for. Do not include the Deaf/Community Service projects. This is to promote the FA contests.

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**3 points for answer to question 6:**

6. Do you have any suggestions of crafts that you have made or seen, or something that you would like the FA Department to include in future contests.

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Did you send your report into the State Family Activities Director by Sept. 15th. Yes\_\_\_ No\_\_\_

Month, Date, Year. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Remember to send your Subordinate report by September 15th to your State Family Activities Director.

Mail To:

Cindy Schlegel

33 E Weis St

Topton, PA 19562