

**MARY MAGURNO CHILD WELFARE AWARD**

**2018-2019**

FOR CABANES LOCALE WITH TWENTY-ONE (21) MEMBERS OR MORE  
RULES GOVERNING THIS TROPHY

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This trophy is to be awarded to the Cabane Locale submitting the best Child Welfare report in assistance to its Voiture Locale. This report to include direct monetary aid (cash), a reasonable value to be placed on other items donated, hours worked, miles traveled, and number of children assisted. Also, the type of activity must be specified. This report must be in conjunction with the Child Welfare Program of your Voiture Locale. DO NOT INCLUDE: Flag presentations, Scouting (Boy, Girl, Cubs, Brownies), Boy's State, Girl's State. These activities should appear on the Americanism Report.

Cabane Locale # _____ de _____	Membership as of June 30, 2019 _____				
Type of Activity Performed	a. Hours Worked	b. Miles Traveled	c. Money Donated	d. Value of Item or Material Used	e. Number of Children Assisted

Total of each column here:

- a. Total Hours Worked \_\_\_\_\_ x \$10.00 = \$ \_\_\_\_\_
- b. Total Miles Traveled \_\_\_\_\_ x \$1.00 = \$ \_\_\_\_\_
- c. Total Money Donated \_\_\_\_\_ \$ \_\_\_\_\_
- d. Total Value of Item or Material Used \_\_\_\_\_ \$ \_\_\_\_\_
- Total of lines a + b + c + d = \$ \_\_\_\_\_
- e. Total Number of Children Assisted = \_\_\_\_\_

ATTESTED:

\_\_\_\_\_  
La Correspondante Locale  
PHONE#( ) \_\_\_\_\_  
email address: \_\_\_\_\_

\_\_\_\_\_  
La Presidente Locale  
PHONE#( ) \_\_\_\_\_  
email address: \_\_\_\_\_

REQUIRED VERIFICATION

"I verify that the above is one of the Voiture Programs."  
or: \_\_\_\_\_  
Voiture Correspondant

Attested by: \_\_\_\_\_  
Chef de Gare  
or: \_\_\_\_\_  
Voiture Advisor

THIS REPORT MUST BE POST MARKED NO LATER THAN JULY 31, 2019

MAIL TO:

JUDY PFALZGRAF  
625 OAK LANE  
HORICON, WI 53032