ANNUAL REPORT TO THE ARCHBISHOP

**ANNUAL REPORT TO THE  
ARCHBISHOP**

**COUNCIL WORKSHEET**

SUMMARY OF ACTIVITIES –  
January 1, 20xx through December 31, 20xx

Council Name:  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City/County:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEMBERSHIP:**

* # of Praesidia:  \_\_\_\_\_  
  Senior Praesidia     \_\_\_\_\_ Junior Praesidia
* # of Parishes with the  
  Legion: \_\_\_\_\_        # of Non-Parochial Praesidia: \_\_\_\_\_
* Spiritual Directors:  
  \_\_\_\_\_ Priests     \_\_\_\_\_ Deacons     \_\_\_\_\_ Religious     \_\_\_\_\_ Tribunes
* Senior Members:  \_\_\_\_\_  
  Total, including \_\_\_\_\_ Praetorians
* Junior Members:  \_\_\_\_\_  
  Total, including \_\_\_\_\_ Praetorians
* Auxiliary Members:  
  \_\_\_\_\_ Auxiliaries and \_\_\_\_\_ Adjutorians

**TANGIBLE RESULTS:**

|  |  |
| --- | --- |
| RESULT | TOTAL |
| Conversions as a result of Legion assignment |  |
| Returns to the Sacraments as a result of Legion assignment |  |
| Marriages Validated as a result of Legion assignment |  |
| Adults Baptized as a result of Legion assignment |  |
| Adults Confirmed as a result of Legion assignment |  |
| Children Baptized as a result of Legion assignment |  |
| Children Confirmed as a result of Legion assignment |  |
| Persons Registered in a Parish as a result of Legion assignment |  |
| Adults Enrolled in RCIA by your praesidium |  |
| Children Transferred to Catholic School as a result of Legion assignment |  |
| Adults Instructed in RCIA by legionaries |  |
| Children Instructed in CCD by legionaries |  |
| Enthronements of the Sacred Heart in the Home |  |
| Family Consecrations to the Sacred Heart of Jesus |  |

**WORKS:**

|  |  |
| --- | --- |
| TYPE OF WORK | TOTAL |
| Door-to-Door Evangelization Calls |  |
| Street Apostolate Contacts |  |
| Pilgrim Virgin Visits |  |
| Shut-in Visits |  |
| Auxiliary Visits |  |
| Bereavement Calls |  |
| New Family Visits |  |
| Visits to Newly Baptized |  |
| Miscellaneous Home Visits |  |
| # of Hospitals Visited Regularly |  |
| # of Nursing Homes Visited Regularly |  |
| # of Prisons Visited Regularly |  |
| # of Other Institutions Visited Regularly |  |

Please report anything   
unusual or interesting done in your area during this reporting  
period:

*(You may attach additional  
sheets as needed.)*

***Please include a list of the   
locations of any non-parochial praesidia in your area.***

***It is NOT necessary to include  
a list of hospitals, nursing homes, prisons, & other institutions.***