

FIRST CATHOLIC SLOVAK LADIES ASSOCIATION

BRANCH ACTIVITY REIMBURSEMENT FORM

**\*\*\*Check will be issued to the Branch Secretary\*\*\***

PLEASE PRINT

Date Submitted: \_\_\_\_\_

S Branch No. \_\_\_\_\_

J Branch No. \_\_\_\_\_

U or W or Z Branch No. \_\_\_\_\_ Junior Members OR Senior Members (*please circle one*)

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

Branch Officer's Name \_\_\_\_\_

WHAT WAS YOUR BRANCH ACTIVITY? \_\_\_\_\_

WHAT WAS THE DATE OF YOUR BRANCH ACTIVITY? \_\_\_\_\_

WHERE WAS THE ACTIVITY HELD? \_\_\_\_\_

HOW MANY MEMBERS ATTENDED? \_\_\_\_\_

PLEASE SHARE SOME OF THE DETAILS AND WHAT THE MEMBERS THOUGHT OF THE BRANCH ACTIVITY.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE MAIL IN WITH THIS FORM THE FOLLOWING:

1. Copy of the invitation you sent out to your members
2. A couple photographs from your branch activity.

TO: FCSLA, Fraternal Director  
24950 Chagrin Blvd.  
Beachwood, Ohio 44122-5634

Questions: call Kelly Shedlock 216.468.1051 or 800-464-4642 EXT 1051

Branch Officer's Signature \_\_\_\_\_

Day Time Phone #  
(include area code)

Cell Phone # (Optional)  
(include area code)

E-Mail Address: \_\_\_\_\_

Revised 1.3.2018