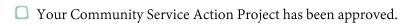






Community Service Action Kit Request Form

Dear Home Office	Coordinators:	
Yes, we woul	d like to hold a ${\it C}$ ommunity ${\it Service Action}$ event.	
Describe the Event:		***
Event Hosted by (Loc	dge) or (Member):	
Event will be held on	(Date):	
Event will be held at	(Place):	
Event Coordinator: _		
Send CSA Kit to:	Name	
	Address	
Members/Friends Pa	rticipating:	
~~~	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	.~~~~
	Home Office Response	



igsquare Your Community Service Action Project has been rejected. Please call the Fraternal Department at 800-LIFE-CSA.





