

DCM Report

District: _____ DCM _____ DATE: _____

Since our last DCM report:

The following important things occurred; _____

We faced these challenges: _____

We carried the message by _____

Current goals of this district are _____

Other things we want to share _____

Please write clearly so the Recording Secretary can transcribe your report correctly. Feel free to use the other side if needed. Electronic submissions to rctrippe@gmail.com would be also be greatly appreciated.