

JOIN HANDS DAY SUMMARY

Must be completed to receive support funding from Home Office

Court Name and Number

Date of Event

Event Description – include name(s) of organization(s) your court joined with for this event

Event Summary – Enclose pictures if available!

Court Officer Signature

Date

Court Officer Address:

Street

City

State

Zip

Phone: _____

Please submit no later than postmark June 10th of the current year to be eligible for support funding to:

**NCSF
Court Relations
320 South School Street
Mount Prospect IL 60056
Fax: 847-342-4697
Email: james_tranel@ncsf.com**