



"Bee Who You Are In ESA"

2020-2021 KANSAS STATE COUNCIL Hope for Hero's Project

Chapter: _____ Town: _____

Name: _____ District: _____

Date: _____

Project & Description:

Total Hours: _____ Total Donations (Monetary): _____

Total Miles: _____ Total Donations (Gifts-in-Kind): _____

Submit completed forms to the Care Connection Co-Chair

Colleen Noll cnoll@m-minsurance.com

823 S Estelle

Wichita, KS 67211

(Due Date no later than April 1, 2021)

Don't forget to submit your Hope for Hero's Gift in Kind form if applicable