

DUE BY: JUNE 30

Circle # _____	Location _____
Sponsoring Council/Assembly # _____	(City) _____
	(State or Province) _____

1. Complete and return the "Officers, Chairmen and Counselors Report" (Form #468-NC) to the Supreme Council office by August 1. (New circles instituted after July 1 need not meet this requirement.)
2. Annually conduct and report at least four (4) major involvement activities in each of the following areas of the Squires program: spiritual, service, circle and membership.
3. Pay July 1 per capita tax on or before October 10. Pay January 1 per capita tax on or before April 10.
4. Complete and return the "Annual Survey of Fraternal Activity" (Form #1728C) to the Supreme Council office by January 31. (New circles instituted after July 1 need not meet this requirement.)
5. Achieve net gain of at least two (2) members by June 30. Attainment of the circle membership quota will be determined through receipt of membership documents processed and recorded at the Supreme Council office between July 1 and June 30.

The circle notary must complete the additional information needed in this application. Each application must be signed by the notary, chief squire and chief counselor. When the application is completed, return immediately to: Columbian Squires, Knights of Columbus Department of Fraternal Services, 1 Columbus Plaza, New Haven, CT 06510-3326. This application must be received in the Supreme Council office by June 30.

SPIRITUAL ACTIVITIES

1. _____

2. _____

3. _____

4. _____

SERVICE ACTIVITIES

1. _____

2. _____

3. _____

4. _____

CIRCLE ACTIVITIES

- 1. _____

- 2. _____

- 3. _____

- 4. _____

MEMBERSHIP ACTIVITIES

- 1. _____

- 2. _____

- 3. _____

- 4. _____

Signed: _____
Notary

Attest: _____
Chief Squire

Attest: _____
Chief Counselor

Date: _____

This Area for Supreme Council Office Use Only

Form #468-NC Received _____

July Per Capita Tax Paid _____

January Per Capita Tax Paid _____

Form #1728C Received _____

Award Application Received _____

Membership Quota Attained _____

Acknowledged _____

Forward Original To: Supreme Council Department of Fraternal Services
Copy To: State Squires Chairman, Circle File