



2011 - 2012

EXECUTIVE SECRETARY'S/ADMINISTRATIVE ASSISTANT'S

(NOTE: IF YOUR JURISDICTION DOES NOT MAINTAIN THIS POSITION, IT IS NOT NECESSARY TO SUBMIT THIS FORM.)

PLEASE PRINT OR TYPE ALL INFORMATION

NAME: _____ JURISDICTION: _____

TITLE: _____

MAIL ADDRESS: _____

PACKAGE ADDRESS: _____

CITY: _____ STATE/ PROVINCE: _____

ZIP/ POSTAL CODE: _____

TELEPHONE:

BUSINESS:(_____) _____

FAX:(_____) _____

HOME:(_____) _____

EMAIL ADDRESS _____

PLEASE COMPLETE AND RETURN TO THE SUPREME COUNCIL BY JUNE 3, 2011

*KNIGHTS OF COLUMBUS
SUPREME COUNCIL GENERAL OFFICE DEPARTMENT
1 COLUMBUS PLAZA
NEW HAVEN, CT 06510-3326
FAX: (203) 752-4108*