

**KNIGHTS OF COLUMBUS****REPORT OF ASSEMBLY OFFICERS CHOSEN FOR THE TERM**

JULY 1, TO JUNE 30, IMMEDIATE UPDATE
JULY 1, TO JUNE 30, UPDATE IN JULY

DATE OF ELECTION _____

LOCATION	CITY	STATE/PROVINCE	ZIP/POSTAL CODE
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FAITHFUL NAVIGATOR	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					
TELEPHONE AREA CODE	PHONE NO.				

FAITHFUL COMPROLLER	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					
TELEPHONE AREA CODE	PHONE NO.				

FAITHFUL FRIAR	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					

FAITHFUL CAPTAIN	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					

FAITHFUL ADMIRAL	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					

FAITHFUL PURSER	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					

FAITHFUL PILOT	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					

FAITHFUL SCRIBE	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
STREET		CITY	STATE/PROVINCE	ZIP/POSTAL CODE	
<input type="checkbox"/> ADDRESS CHANGE					

INNER SENTINEL	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
OUTER SENTINEL	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
ONE YEAR TRUSTEE	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
TWO YEAR TRUSTEE	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.
THREE YEAR TRUSTEE	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	COUNCIL NO.

ASSEMBLY MEETS:

Faithfull Navigator

Name

Membership No.

IMPORTANT INSTRUCTIONS

NO MEMBER SHALL BE ELIGIBLE TO HOLD OFFICE IN AN ASSEMBLY UNLESS HE IS IN GOOD STANDING AND PAYS HIS DUES BOTH IN THE COUNCIL AND IN THE ASSEMBLY. FORWARD COMPLETED COPY OF THIS REPORT IMMEDIATELY FOLLOWING THE ELECTION AT THE FIRST REGULAR MEETING IN JUNE. THIS REPORT IS ESSENTIAL FOR THE TRANSACTION OF OFFICIAL BUSINESS AND DIRECT MAIL COMMUNICATIONS WITH OFFICERS.

SUBMIT TO: Supreme Secretary

COPIES TO: State Deputy, Vice Supreme Master, Master, Assembly File

THIS FORM MAY ONLY BE COMPLETED, PRINTED OUT AND SUBMITTED THROUGH MAIL