



Council # _____ **Council Name:** _____ **DATE OF ELECTION** _____

PLEASE PRINT – INDICATE MEMBERSHIP NUMBERS

Due By:
JUNE 30, 20__

COUNCIL ADDRESS (Meeting Location)

STREET				MAILING ADDRESS (Street, City, Zip)			
CITY	ST	POSTAL		Bus. MTG (i.e. 4th Tues 8pm)	Officers' MTG		
GRAND KNIGHT	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	WIFE'S NAME - if married		
		STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE		

ADDRESS CHANGE

NEWLY ELECTED RE-ELECTED

TELEPHONE AREA CODE	PHONE NO.	EMAIL:
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DEPUTY GRAND KNIGHT	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
		STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE

ADDRESS CHANGE

CHANCELLOR	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
		STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE

ADDRESS CHANGE

RECORDER	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
		STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE

ADDRESS CHANGE

TREASURER	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
		STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE

ADDRESS CHANGE

ADVOCATE	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
		STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE

ADDRESS CHANGE

WARDEN	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
		STREET	CITY	STATE/PROVINCE	ZIP/POSTAL CODE

ADDRESS CHANGE

INSIDE GUARD	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
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OUTSIDE QUARD	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
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TRUSTEE FOR ONE YEAR	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
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TRUSTEE FOR TWO YEARS	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
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TRUSTEE FOR THREE YEARS	MEMBERSHIP NO.	LAST NAME	FIRST NAME	INITIAL	EMAIL
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CHAPLAIN	MEMBERSHIP NO.	TITLE, FIRST and LAST NAME	STREET CITY State ZIP	PHONE (10 digits)	EMAIL
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FINANCIAL SECRETARY	MEMBERSHIP NO.	FIRST and LAST NAME	STREET CITY State ZIP	PHONE (10 digits)	EMAIL
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COUNCIL MEETS _____

SIGNED F.S. _____

- THIS INFORMATION IS ESSENTIAL FOR TRANSACTION OF OFFICIAL BUSINESS AND DIRECT MAIL COMMUNICATIONS WITH OFFICERS.
 - APPOINTMENT OF FINANCIAL SECRETARY. (SECTION 128, LAWS AND RULES).
- THE FINANCIAL SECRETARY SHALL BE APPOINTED BY THE SUPREME KNIGHT. HE SHALL HOLD OFFICE AT THE WILL OF THE SUPREME KNIGHT.

COUNCIL NO.

ORANGE COUNTY CHAPTER DIRECTORY INFORMATION --- COLUMBIAN YEAR 2011-2012

Information MUST be received by Chapter Secretary Not-Later-Than 15 Jun 2011

In order for Council Delegates to be able to vote on the business matters at the June 2011 Chapter Meeting

TITLE	NAME / Number	Address	Communications
1 st DELEGATE	GRAND KNIGHT (automatic)	Delegates & Alternates MUST be 3rd Degree	
2 nd DELEGATE Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
3 rd DELEGATE Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
1 st ALTERNATE Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
2 nd ALTERNATE Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
3 rd ALTERNATE Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
Pro-Life Chairman Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
MR Drive Chairman Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
Special Olympics Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
WheelChair Foundation Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
Basketball FreeThrow Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
Membership Chairman Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
Bulletin Editor Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax:
Soccer Challenge Member No.	Last: First:	Address: City: ZIP:	Email: Tel: Fax: