

# Knights of Columbus

British Columbia and Yukon State Council

## STATE DIRECTORY INFORMATION FORM

Due June 15

The following information is required for the State Directory. Please complete and send to the State Secretary immediately after your circle elections. ***Please also use this form throughout the year to submit changes.***

<b>CIRCLE INFORMATION:</b>	Number: _____
Name: _____	Location/City: _____

**GENERAL MEETING :**  1st  2nd  3rd  4th  Last week  Sun  Mon  Tue  Wed  Thu  Fri  Sat

**EXECUTIVE MEETING:**  1st  2nd  3rd  4th  Last week  Sun  Mon  Tue  Wed  Thu  Fri  Sat

### Chief Squirette Information:

First Name: \_\_\_\_\_  
Uses as First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone (area code ): \_\_\_\_\_  
Fax (area code ): \_\_\_\_\_  
Email address: \_\_\_\_\_

### Chief Counsellor Information:

First Name: \_\_\_\_\_  
Uses as First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone (area code ): \_\_\_\_\_  
Fax (area code ): \_\_\_\_\_  
Email address: \_\_\_\_\_  
Spouse First Name: \_\_\_\_\_

### Father Prior Information:

First Name: \_\_\_\_\_  
Uses as First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone (area code ): \_\_\_\_\_  
Fax (area code ): \_\_\_\_\_  
Email address: \_\_\_\_\_  
Name of Parish: \_\_\_\_\_

### Sponsoring Council/Assembly:

Number: \_\_\_\_\_  
Name: \_\_\_\_\_  
Location/City: \_\_\_\_\_

Please email or mail completed form to:

**State Secretary: Edgardo Panes**  
11260 Third Avenue  
Richmond, BC. V7E 5A1  
email: edpkofc@gmail.com