



KNIGHTS OF COLUMBUS

**IOWA
KNIGHT OF THE MONTH
REPORT
FORM**



THIS REPORTING FORM SHOULD BE COMPLETED BY EACH COUNCIL AND FORWARDED TO THE NAME BELOW.

Council No. _____ City _____ GK Phone No. _____

Month	Knight of the Month – Name	Shirt Size
July	_____	_____
August	_____	_____
September	_____	_____
October	_____	_____
November	_____	_____
December	_____	_____
January	_____	_____
February	_____	_____
March	_____	_____
April	_____	_____
May	_____	_____
June	_____	_____

KNIGHT OF THE YEAR

Name _____

Address _____

City _____ Phone () _____

By the tenth (10th) of the following month you select the Knight of the month for your council:

E-Mail Monthly Information to: rljacoby@netins.net or
 Mail Monthly Information to: State Councils Active Chairman
 Richard L. Jacoby
 403 Williams Street
 Victor, IA 52347
 319-647-3527

