



KNIGHTS OF COLUMBUS

**IOWA
STATE COUNCIL
DISTRICT DEPUTIES
REPORT FORM**



THIS REPORTING FORM MUST BE COMPLETED BY EACH DD AND FORWARDED TO THE DIOCESAN DIRECTOR.

Name: _____ District: _____ Diocese: _____

Reporting Period: (circle one) 9/30/07 12/31/07 3/31/08 6/30/08

Date Prepared: _____ 9/30/08 12/31/08 3/31/09 6/30/09

Worthy District Deputy, copy this form, complete it before the month/day listed above, make a copy for yourself, and mail it to your Diocesan Director. Call the Director if you will not have it in the mail by the month/day. Before completing this form, read the instructions in *District Deputy Handbook*. The purpose of this report is to obtain your feedback on your results in order to appropriately direct coaching. Attach any additional pages as necessary

1. What did you accomplish in your district councils this past quarter? _____

2. What specific results did you accomplish in your councils? _____

3. What did you discover that worked, did not work, or was missing? _____

4. What will you accomplish in your district councils this next quarter? _____

5. What specific results will you accomplish in your councils? _____

6. What specific actions will you promise to take this next quarter? _____

7. What concerns, constraints, etc. do you have? _____

8. What areas do request help in for training or coaching? _____

9. Council Requirements

Council #	Council Requirements Met	Council Requirements Missed

DO NOT SUBMIT THIS REPORT FORM TO THE SUPREME COUNCIL

Deadline: Quarterly

Mail form to your Diocesan Director



KNIGHTS OF COLUMBUS

**IOWA
STATE COUNCIL
DISTRICT DEPUTIES
CHECKLIST**



THIS REPORTING FORM SHOULD BE COMPLETED BY EACH DD TO KEEP TRACK OF COUNCILS

Write in the dates each of these items was ordered by your district councils or when the report forms were sent to you.

Reports	Council #	Council #	Council #	Council #	Council #
Annual Survey of Fraternal Activities					
Semi-Annual Council Audit-1					
Semi-Annual Council Audit-2					
Annual Report KofC Round Table					
RSVP					
Report of Officers Chosen for Term					
Service Program Personnel Report					
Report of Round Table Coordinator					
Council Activities Report-1					
Council Activities Report-2					
Council Activities Report-3					
Council Activities Report-4					
Columbian Squires Inquiry Essay Kit					
Soccer Kit					
Spelling Bee Kit					
Substance Abuse Awareness Kit					
Free Throw Kit					
Grand Knight of the Year					
Knight of the Year					
Youth of the Year					
Family of the Year					
Chaplain of the Year					
Religious of the Year					



KNIGHTS OF COLUMBUS



**IOWA
PERSONS with INTELLECTUAL DISABILITIES DRIVE
DISTRICT DEPUTY TOOTSIE ROLL ORDER
FORM**

Please complete this Tootsie Roll order form and send a copy to the State Secretary
NO LATER THAN MARCH 15TH.

Grand Knights have been instructed to return their Council order forms to you no later than March 1ST. The minimum order for free delivery is 33 cases. If the total for your District is less than 33 cases combine your order with neighboring District Deputies to reach the minimum and agree on a common delivery site. If you have your cases delivered to another District, this form still needs to be filled out and returned to me.

This order form must be returned **NO LATER THAN MARCH 15TH**

District Deputy _____ Phone _____

<u>Council #</u>	<u>District #</u>	<u># of Cases</u>	<u>Dates of Drive</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Shipping Address:

Name _____

Street Address _____

City _____ State _____ Zip _____

Phone (_____) _____

NOTE: Someone must confirm order quantity when Tootsie Rolls are delivered. Note any discrepancies in count on the receiving paperwork and notify the State Secretary immediately.

Mail Completed Form To: Michael P. Laake, State Secretary
6 Alexander Rd.
Estherville IA 51334-1012

Please feel free to call me with any questions: (712) 362-9919

Retain a copy of this form for your own records.