

IN-RC1



*Knights of Columbus*  
INDIANA STATE COUNCIL

DUE BY: July 15

COUNCIL RETENTION COMMITTEE REPORT

For Fraternal Year 20\_\_ - 20\_\_

COUNCIL NUMBER: \_\_\_\_\_ DISTRICT #: \_\_\_\_\_ DATE: \_\_\_\_\_

COUNCIL NAME : \_\_\_\_\_

GRAND KNIGHT: \_\_\_\_\_

CHAIRMAN:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY & ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

E-Mail Address \_\_\_\_\_

MEMBER:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY & ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

E-mail Address \_\_\_\_\_

MEMBER:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY & ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

E-mail Address \_\_\_\_\_

MEMBER:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY & ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

E-mail Address \_\_\_\_\_

SUBMIT TO: State Retention Chairman

COPIES TO: District Deputy  
Council Files

**A fill-in version of this form is available online**  
**at <http://www.indianakofc.org/forms>**