

District Deputy Check List for Councils (DD CL-1)

District: _____ Month: _____ DD Name: _____
(signature)

Council Number:						
Supreme Form 185 (due June 30th)						
Supreme Form 365 (due June 30th)						
IN-Form 1 (due June 15th)						
Semi-Annual Council Audit (due 8/15)						
Supreme Fraternal Survey Report 1728 (due January 31st)						
Semi-Annual Council Audit (due 2/15)						
STSP form (due February 28th)						
Supreme form SP-7 (due June 30th)						
SEP Fully Compliant						
Council Newsletter (1 per quarter min.)						
GK met with Pastor or PLC						
Fall Delta Church Drive						
Spring Delta Church Drive						
Two Fraternal Benefits Nights (signed off by GA or FA, use Supreme form 11077)						
2 delegates to state convention (verify with State Program Director)						
SOS Contributions or RSVP program participation (SOS is state, RSVP is Supreme)						
State Ultrasound Fund Contribution						

Fill and send a copy of this report monthly to the State Program Director (program@indianakofc.org), the State Membership Director (membership@indianakofc.org), the State Forms Chairman (forms@indianakofc.org) and the State Online Membership Chairman (online@indianakofc.org)

This form is available online at: www.indianakofc.org/forms

revised 11/22