

ILLINOIS STATE COUNCIL
2010-2011 DIRECTORY INFORMATION

****PLEASE PRINT OR TYPE****

READ THIS BEFORE YOU COMPLETE THIS FORM. This information will appear in our State Directory:
Please provide your **COMPLETE** address including: Directions (N, S, E, W), Avenue, Street, Drive, Lane etc. Be sure to show your **PO Box AND** your **HOUSE ADDRESS**. The State Office needs **BOTH** addresses.
*** FIELD MUST BE COMPLETED IF APPLICABLE**

COUNCIL NAME _____		COUNCIL# _____	
MEETING LOCATION ADDRESS * _____		PO BOX # * _____	
CITY _____		ZIP CODE +4 CODE (if known) _____ - _____	
MEETING LOCATION PHONE: (_____) _____		FAX #(_____) _____	
COUNCIL MEETS ON WHAT DAYS OF THE MONTH: (i.e. 2ND AND 4TH THUR, etc): _____			
COUNCIL WEB SITE : _____		Email _____	
TYPE OF MEETING FACILITIES		CIRCLE ONE	
A) MEETS AT CHURCH OR SCHOOL HALL-ON MEETING NIGHTS ONLY		A	
B) CLUBROOM-BUILDING - RENTAL-OPEN MEETING NIGHTS ONLY		B	
C) CLUBROOM-K OF C FACILITY-OPEN TO MEMBERS ONLY		C	
D) CLUBROOM-K OF C FACILITY-OPEN TO PUBLIC		D	
E) OTHER: _____		E	

IF THERE IS NO CHANGE IN GRAND KNIGHT FROM LAST YEAR'S DIRECTORY PLEASE CHECK BOX

2010-2011 GRAND KNIGHT

NAME _____ SPOUSE'S NAME _____

HOUSE ADDRESS * _____ APT, UNIT, LOT # * _____

AND PO BOX # * _____ CITY _____ ZIP CODE +4 CODE (if known) _____ - _____

PHONE: * (_____) _____ BUSINESS (_____) _____ FAX #(_____) _____

E-MAIL ADDRESS _____

IF THERE IS NO CHANGE IN FINANCIAL SECRETARY SINCE LAST YEAR'S DIRECTORY PLEASE CHECK BOX

FINANCIAL SECRETARY

****AS APPOINTED BY SUPREME COUNCIL****

NAME _____ SPOUSE'S NAME _____

HOUSE ADDRESS * _____ APT, UNIT, LOT # * _____

AND PO BOX # * _____ CITY _____ ZIP CODE + 4 CODE (if known) _____ - _____

PHONE: * (_____) _____ BUSINESS: (_____) _____

E-MAIL ADDRESS _____ FAX # (_____) _____