

**Michigan State Council  
Knights of Columbus**

\_\_\_\_\_  
Council Number

\_\_\_\_\_  
Name of Council

We, the Grand Knight and Financial Secretary of the above-named Council do hereby certify that at a meeting of this Council held on:

\_\_\_\_\_  
month / day/ year

The following named brothers were elected as Delegates and Alternates to represent this Council at the next State Convention of the Michigan State Council Knights of Columbus.

**First Delegate** Full Name: \_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

**Second Delegate** Full Name: \_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

**First Alternate** Full Name: \_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

**Second Alternate** Full Name: \_\_\_\_\_

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
month / day/ year

\_\_\_\_\_  
Grand Knight

The Date the Form 4 was submitted to the  
State Office

\_\_\_\_\_  
Financial Secretary

**Please fill out this form the night of your Delegates' election and submit as soon as possible .  
The State Office needs this information ASAP and no later than March 15th.  
You have three options to return the convention Form 4:**

**(1) Save completed form to your computer.**

**Attach and Email To: [StateOffice@mikofc.org](mailto:StateOffice@mikofc.org)**

**(2) FAX to State Office at (586) 883-9473**

**(3) Mail to:**

**Michigan State Council  
6025 Wall Street  
Sterling Heights, Michigan 48312**

**Any changes of delegates or alternates please contact  
the State Office immediately at 586-883-9456**