

Michigan State Council



Knight of the Month Report Form

Knight of the Year Report Form

Date:	
Council Number:	
Council Name:	
Current Grand Knight:	
Home Diocese:	
District:	

Brother Knight:	
Selected as "Knight of the Month" for Month & Year:	
Address:	
City:	
State:	
Zip:	
Phone Number:	
Spouse:	
Positions Held in Council:	
Our Council's "Knight of the Month" was selected for the following reasons:	

Grand Knight:

Send to State Council/ Community Activities Director

E-Mail to: d.searle@mikofc.org
text only not a link