

THIS STATEMENT IS TO BE SENT TO THE SERVICE AND LEADERSHIP CENTER WITHIN TEN DAYS AFTER CEREMONY OF INVESTITURE

Priority; Priory # _____

Dated _____ 19 _____

Date received in Grand Secretary's Office

Number of candidates receiving Knighthood Degree _____

Check No. _____

\$10.00 for Each Candidate

Located in _____ City _____ State _____

Amount of check accompanying this report - \$ _____

PRINT FULL NAME:	Last Name	First Name	Middle Name	Date of Birth	Date Degree Received MO.-Day-YR.
1. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
2. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
3. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
4. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
5. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
6. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
7. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
8. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					
9. Name (In full)					
Mailing Address, apt. no.					
City, State, ZIP Code					

ALL CORRESPONDENCE AND PATENTS SHOULD BE SENT TO

Name _____ ID# _____

Address _____ Phone # _____

Dated _____ 19 _____ City, State _____ Zip _____

SEND COPIES TO: WHITE - SERVICE AND LEADERSHIP CENTER; YELLOW - EXECUTIVE OFFICER; PINK - PRIORY FILE