

# Assembly Directory Information

Report Date\* \_\_\_\_\_  
Month / Day / Year

District\* \_\_\_\_\_

\* Required to Submit

All Assembly information same as last year

Assembly Number\* \_\_\_\_\_ Assembly Name \_\_\_\_\_

Meeting Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Assembly Phone \_\_\_\_\_ Meeting(s) Time \_\_\_\_\_

Meeting Day(s) \_\_\_\_\_  
1st \_\_\_\_\_ 2nd \_\_\_\_\_

## Faithful Navigator

All Faithful Navigator information same as last year

Name \_\_\_\_\_ Wife \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ @MiKofC.org  
and / or

Email \_\_\_\_\_ @

## Faithful Comptroller

All Faithful Comptroller information same as last year

Name \_\_\_\_\_ Wife \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ @MiKofC.org  
and / or

Email \_\_\_\_\_ @

## Councils assigned to Assembly

All Councils assignments same as last year

\_\_\_\_\_  
\_\_\_\_\_

## Special Notes

**Please fill this form out the night of your Assembly elections and submit as soon as possible. Save the completed form to your computer and Email to the District Master and FVSM Cliff Wasmund at: spwasmund@aol.com - ASAP and no later than June 1**

**Special Note:** The information on this form will only be utilized by the Michigan State Council Knights of Columbus. It will not be sold or disseminated to any other organization. It will be posted on our secure website in a location that requires an authorized user to sign in and supply appropriate credentials.