

CONNECTICUT STATE DIRECTORY

LOCAL COUNCIL INFORMATION

COUNCIL #:	<input type="text"/>	COUNCIL NAME:	<input type="text"/>	
COUNCIL MAILING ADDRESS:	<input type="text"/>			
	<input type="text"/>			
	<input type="text"/>			
COUNCIL TELEPHONE NUMBER:	(<input type="text"/>)	<input type="text"/>	- <input type="text"/>	<input type="text"/>
COUNCIL MEETING NIGHT(S):	First:	<input type="text"/>		
	Second:	<input type="text"/>		
COUNCIL MEETING LOCATION:	<input type="text"/>			
	<input type="text"/>			
	<input type="text"/>			
COUNCIL WEBSITE ADDRESS:	<input type="text"/>			
COUNCIL E-MAIL ADDRESS:	<input type="text"/>			

COUNCIL GRAND KNIGHT INFORMATION

NAME:	<input type="text"/>					
HOME ADDRESS:	<input type="text"/>					
	<input type="text"/>					
TELEPHONE NUMBERS:	Home:	(<input type="text"/>)	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
	Work:	(<input type="text"/>)	<input type="text"/>	-	<input type="text"/>	Ext.: <input type="text"/>
	Cell:	(<input type="text"/>)	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
E-MAIL ADDRESS:	<input type="text"/>					
PERMISSION TO PUBLISH ALL INFORMATION IN DIRECTORY:	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="checkbox"/>

COUNCIL FINANCIAL SECRETARY INFORMATION

NAME:	<input type="text"/>					
HOME ADDRESS:	<input type="text"/>					
	<input type="text"/>					
TELEPHONE NUMBERS:	Home:	(<input type="text"/>)	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
	Work:	(<input type="text"/>)	<input type="text"/>	-	<input type="text"/>	Ext.: <input type="text"/>
	Cell:	(<input type="text"/>)	<input type="text"/>	-	<input type="text"/>	<input type="text"/>
E-MAIL ADDRESS:	<input type="text"/>					
PERMISSION TO PUBLISH ALL INFORMATION IN DIRECTORY:	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	<input type="checkbox"/>

Mail Form to: Pedro Monroy P O Box 203511 New Haven, CT. 06520
Or Email to: executivesecretary@sbcglobal.net