



Massachusetts State Council Knights of Columbus
 470 Washington Street, Norwood, MA 02062 Tel: 781-551-0628, Fax: 781-551-0490

District Deputy

_____ Date _____

REQUEST FOR EXEMPLIFICATION OF THE THIRD DEGREE

Worthy State Deputy:

It is requested that the Third Degree be Exemplified on a class of candidates from the following Councils in my District:

<u>Council Name and Number</u>	<u>Anticipated Number of Candidates</u>
_____	_____
_____	_____
_____	_____
_____	_____

To be held at (place) : _____

Street and Number : _____ City/Town : _____

On _____
 Day of the Week Date Time

(Complete the following if Applicable)

The Degree is to be held in conjunction with the following Councils from other Districts:
 (Note: Each District Deputy is required to submit this request for his own Councils)

<u>Council Name and Number</u>	<u>Anticipated Number of Candidates</u>
_____	_____
_____	_____
_____	_____

_____ Signature of District Deputy _____ District Number

Approved: _____ (State Deputy)

Team Assigned by the State Ceremonials Chairman: _____