_					
Motion Date:				Date Approved:	
Made By:			Second by:		
Motion to:					
Estimated Number	T				
of Knights Needed:					
·					
Estimated Cost and Description:					
Program:					
□Faith	☐Family	☐Community	□Life	☐Grotto	
Operations	Budgeted	1	1		
Are there other Ministries/Groups in the Church involved ?: Yes or No					
Who:			Date Notified	:	
Parish					
Pastor					
Comments:					
Signed:			Date:		
Date presented to Officers:					
Grand Knight sign-off:					
Deputy Grand Knight sign-off:					
Treasurer sign-off:					
Financial Secretary sign-off:					
Trustees: 1 yr.		2 yr.	3 yr.		
Notes and Follow up	:				