



**Carl A. Anderson, Supreme Knight**  
**Knights of Columbus**  
**Attn: Financial Secretary Department**  
**1 Columbus Plaza**  
**New Haven, Connecticut 06510-3326 U.S.A.**

Worthy Supreme Knight,  
The following evaluation of Financial Secretary \_\_\_\_\_ is hereby submitted:  
(Place check (✓) in appropriate box)  
The Financial Secretary's current major occupation is: \_\_\_\_\_

	Excellent	Good	Fair	Poor
1. Bills members on time and in the proper manner. Mails membership cards promptly. Follows procedures for NOTICE OF INTENT TO SUSPEND.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Attends regular meetings, special meetings and First Degrees.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. All books and records available and in good condition for semi-annual audits by trustees. Available to answer questions during audit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Promptly mails all required forms (membership documents, Officers Report, Fraternal Survey, etc) to proper persons.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Cooperates fully with all council officers and chairmen.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Promptly draws orders on the treasurer for payment of bills levied against the council. Turns all funds collected over to the treasurer for deposit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Reviews monthly council statements and semi-annual membership rosters with the council and grand knight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Rating of his overall attitude and efficiency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The reappointment of Brother \_\_\_\_\_ is hereby recommended  (Check one)  
(If not recommended please provide reasons with this form.) not recommended

\_\_\_\_\_  
Trustee

\_\_\_\_\_  
Trustee

\_\_\_\_\_  
Trustee

\_\_\_\_\_  
Grand Knight

Date: \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
District Deputy

Council No. \_\_\_\_\_ Location \_\_\_\_\_ City \_\_\_\_\_ State/Province \_\_\_\_\_

**THIS SECTION TO BE COMPLETED BY THE STATE DEPUTY**

The above evaluation of the Financial Secretary of this Council is hereby noted. I am forwarding the recommendation of the Grand Knight, Trustees and District Deputy for your decision.

Dated: \_\_\_\_\_ State Deputy \_\_\_\_\_