

DEGREE AUTHORIZATION

TO: _____ DATE OF DEGREE _____
Financial Secretary FROM COUNCIL NO: _____
COUNCIL NO. _____ LOCATION: _____

WORTHY FINANCIAL SECRETARY:

THIS IS TO CERTIFY THAT (see attached list) HAS BEEN GRANTED PERMISSION
TO RECEIVE THE _____ DEGREE.

COUNCIL VOTE (First Degree)

COUNCIL SEAL

District Deputy

Grand Knight

DEGREE CERTIFICATION

TO: _____ DATE: _____

COUNCIL NO. _____

LOCATION: _____

ON _____ THE _____ DEGREE
(Date)

WAS CONFERRED ON (see attached list).

COUNCIL SEAL

Financial Secretary

COUNCIL NO. _____

LOCATION _____