

# Michigan State Council Retention Worksheet



COUNCIL NAME	COUNCIL NUMBER	ANNUAL DUES	DISTRICT NUMBER
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MEMBER	PHONE NUMBER	DUES IN ARREARS	CONTACTS VERIFIED BY DISTRICT DEPUTY
STREET ADDRESS	CITY	ZIP CODE	
PROPOSER	PHONE NUMBER	DATES OF CONTACT	
RETENTION COMMITTEE CONTACT PERSON	PHONE NUMBER	DATES OF CONTACT	
RETENTION COMMITTEE COMMENTS			
		SUSPEND	RETAIN

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COUNCIL RETENTION DIRECTOR	GRAND KNIGHT SIGNATURE	DISTRICT DEPUTY
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