



# Knights of Columbus

## Exemplification of the Fourth Degree Information Package

Sunday, June 7, 2020

### **EXEMPLIFICATION**

Saint Mary Church  
5 Hillhouse Ave.  
New Haven, CT 06511

### **BANQUET**

The Woodwinds Banquet Facility  
29 Schoolground Road  
Branford, CT 06405

### **HOSTED BY**

Allyn Temple  
CT District Master of the Fourth Degree  
Assisted by  
Honorable W. Patrick Donlin Assembly # 2459  
New Haven, CT



KNIGHTS OF COLUMBUS  
**FOURTH DEGREE**  
 HON W. PATRICK DONLIN ASSEMBLY 2459  
 SAINT MARY CHURCH  
 5 HILLHOUSE AVENUE  
 NEW HAVEN, CONNECTICUT 06511



**REVISED**

November 2019

Dear Sir Knights & Brothers:

We are honored to announce that the Hon. W. Patrick Donlin Assembly 2459 will be assisting our District Master Allyn Temple in hosting the next exemplification of the Fourth Degree on Sunday, June 7, 2020, at Saint Mary Parish in New Haven.

The District Master has announced that the honoree will be Sir Knight Rev. John Paul Walker, OP, pastor of Saint Mary Parish, birthplace of the Order. Note that this exemplification will be Sir Knight Allyn Temple's final exemplification as our District Master.

Information on the Exemplification:

**Dress for Candidates and Members of the 4<sup>th</sup> Degree:**

Candidates will wear a dark business suit and dark tie. Note that active members of the Armed Forces, Police or Fire Personnel may wear their Class A uniforms. 4<sup>th</sup> Degree Sir Knights may wear 4<sup>th</sup> Degree uniform, a tuxedo or dark suit with the social baldric.

**Dress for Guests (Non-Sir Knights - for the dinner)**

For men, Black Tie is preferred; however dark business suit and tie is acceptable. For ladies we ask that they dress appropriately.

**Costs:**

Candidate Fee:	\$70.00 which includes one Banquet ticket
Add'l Banquet Tickets:	\$50.00 per person
	\$55.00 per person (Prime Rib)
	<i>(Refer to the <b>Meal Options &amp; Directions</b> flyer for specific meal options)</i>
Ladies Event:	\$25.00 per person

**Tentative Schedule:** (which may be slightly adjusted as the Exemplification nears)

12:00 PM	Mass (Saint Mary Church)
1:00 PM	Registration of Candidates & Guests
1:45 PM	Ladies Program
2:15 PM	Exemplification
5:00 PM	Reception (cash bar - Woodwinds)
6:00 PM	Banquet (Woodwinds)

Note that the banquet seating will be based on the order that requests and payments are received. If you wish a full table(s) of ten, please submit the full table assignments and payments at the same time.

Attached are the required form(s) for registering candidates and reserving tickets for candidates and guests for the various events of the Exemplification. These forms, along with properly completed Form 4's and full payments (**payable to: Allyn Temple, District Master**) should be submitted to **Robert A. Goossens, PFN, PSD (205 Church Street, Unit 7J, New Haven, CT 06510)**.

**The deadline for application and reservations is May 27, 2020.**

If there are any questions, please contact me at 203-799-7818 or [mmuttitt@optonline.net](mailto:mmuttitt@optonline.net)

Fraternally,

Michael Muttitt  
 Faithful Navigator



KNIGHTS OF COLUMBUS  
**FOURTH DEGREE**  
HON W. PATRICK DONLIN ASSEMBLY 2459  
SAINT MARY CHURCH  
5 HILLHOUSE AVENUE  
NEW HAVEN, CONNECTICUT 06511



### **MEAL OPTIONS**

#### **Meal Choices:**

Roasted Salmon with Cream Dill Sauce  
Chicken Breast Supreme – Stuffed with Spinach and Mozzarella  
Vegetarian Lasagna  
Prime Rib

### **DIRECTIONS**

#### **Directions to Saint Mary Parish**

5 Hillhouse Avenue - Neven, CT 06510

Traveling North or South on I-95

Take I-95 to New Haven. In New Haven, follow I-91 North. Take Exit 3 (Trumbull Street) off I-91. Proceed to the 3rd traffic light (including the one at the end of the ramp). At the 3rd light, turn left, onto Temple Street. Approximately halfway into the block, on the right-hand side is the rear of the church. When you come to the next traffic light (Grove Street) turn right, and then proceed right at the next road (Hillhouse Avenue). Church is on the right-hand side.

#### **Parking at Saint Mary Parish**

- Parking is available on Hillhouse Avenue and surrounding streets. (*Meters are not active on Sundays*)
- A public parking garage is located on Grove Street, between Church and Temple Streets.
- Yale University has granted St. Mary's Parish parking privileges as follows:
  - Behind International Center - located on Temple Street between Trumbull and Grove Streets; on the left-hand side just before crossing the bridge. This lot is available on evenings and weekends.
  - Yale Parking Lot #51 - located on Temple Street between Wall and Elm Streets. This lot is open to the public after 4:00 p.m. on Friday and through the weekend.
  - Yale Parking Lot #30 - located on the corner of Hillhouse and Trumbull Streets (access from Hillhouse Street), next to the old Yale Health Center location. This lot is available for Parish use from 4pm to 7:30am Monday-Friday; and 24 hours a day on weekends. (Note: on "key event" days at Yale, this lot might be closed for valet parking.)

#### **Directions to The Woodwinds**

##### **From Saint Mary Parish**

29 Schoolground Rd.  
Branford, CT 06405

Take I-91 South to I-95 North toward New London  
Take Exit 56. Turn left off the exit onto Leetes Island Rd.  
Cross over Route 1, which turns into Schoolground Rd.  
Continue for ½ mile Woodwinds is on the Right







KNIGHTS OF COLUMBUS  
**FOURTH DEGREE**  
ST. MARY CHURCH  
5 HILLHOUSE AVENUE  
NEW HAVEN, CONNECTICUT 06511



## Souvenir Program Book Contract June 7, 2020 Exemplification

Please provide camera-ready copy of your ad  
Full Page is approx. 4 ½" x 7 ½"

**This is a FULL COLOR Souvenir Book**

Ads must be received by May 15, 2020, **NO EXCEPTIONS**

- |   |          |
|---|----------|
| <input type="checkbox"/> Full Page:         | \$250.00 |
| <input type="checkbox"/> Half Page          | \$150.00 |
| <input type="checkbox"/> Inside Front Cover | \$500.00 |
| <input type="checkbox"/> Inside Back Cover  | \$500.00 |
| <input type="checkbox"/> Quarter Page       | \$100.00 |
| <input type="checkbox"/> Booster            | \$ 25.00 |

---

Name: \_\_\_\_\_

Company / Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_

**Make checks payable to: Allyn Temple, District Master**  
**DEADLINE FOR ADS IS MAY 15, 2020**

**RETURN THIS FORM WITH AD COPY AND PAYMENT TO:**

**Hon. W. Patrick Donlin Asm 2459**  
**c/o Robert A. Goossens, PFN, PSD**  
**205 Church Street, Unit 7J**  
**New Haven, CT 06510**

*Ads can be submitted electronically to: [Asm2459Exemplification@gmail.com](mailto:Asm2459Exemplification@gmail.com)*

# PROPER COMPLETION OF FORM 4

At the request of the Worthy District Master of Connecticut, please review these instructions on completing a Form 4 properly.

Please note that all the (X) marks indicated below are areas that must be completely filled out before submitting a completed form for the Exemplification. **Section 1, 2, 4 and 6 are to be filled out by the candidate.** After which the proper signature of the Financial Secretary of the CANDIDATE'S HOME COUNCIL is to be filled out in **Section 7.** Finally the Faithful Navigator and the Faithful Comptroller of the Assembly of which the candidate is **joining** are to be affixed to the Form 4 in **Section 5.** Then the COMPLETED Form 4 with payment must be forwarded to the Assembly that is **assisting The District Master who is Hosting** the Exemplification. All payments/checks are to be made out to **Allyn Temple, District Master.**

**To Summarize Sections 1, 2, 4, 5, 6 and 7 are to be completely filled out before the Form 4 application is to be submitted with the proper payment.**

PLEASE NOTE if the Form 4 is not completed as directed, it could be returned to the Assembly to be corrected, which will result in a delay in the process. Please, Please take note to make this procedure proceed as smoothly as possible for your candidates and submit your paperwork as early as possible.

Your care and cooperation in this matter is greatly appreciated.

Thank you



**FOURTH DEGREE MEMBERSHIP DOCUMENT**  
**KNIGHTS OF COLUMBUS**  
 A SOCIETY OF CATHOLIC MEN

PRINTED  
IN  
U.S.A.

4 12/14

LAST NAME <input checked="" type="checkbox"/> FIRST NAME <input checked="" type="checkbox"/> MIDDLE INITIAL <input checked="" type="checkbox"/> TITLE <input checked="" type="checkbox"/>				MEMBERSHIP NUMBER <input checked="" type="checkbox"/>	
STREET <input checked="" type="checkbox"/> CITY <input checked="" type="checkbox"/> ST / PROV <input checked="" type="checkbox"/> POSTAL CODE / COUNTRY <input checked="" type="checkbox"/>				<input checked="" type="checkbox"/> NEW MEMBER <input type="checkbox"/> RESTORATION	
HOME PHONE <input checked="" type="checkbox"/> DATE OF BIRTH <input checked="" type="checkbox"/>		MARITAL STATUS <input checked="" type="checkbox"/> 1st DEGREE DATE <input checked="" type="checkbox"/>		<input type="checkbox"/> TRANSFER <input type="checkbox"/> HONORARY MEMBERSHIP <input type="checkbox"/> HONORARY LIFE MEMBERSHIP	
COUNCIL NO. <input checked="" type="checkbox"/>		CITIZEN OF WHAT COUNTRY? <input checked="" type="checkbox"/> BY BIRTH OR NATURALIZATION? <input checked="" type="checkbox"/>		<input type="checkbox"/> DATA CHANGE <input type="checkbox"/> SUSPENSION _____ reason	
IF YOU WERE PREVIOUSLY INITIATED IN THE FOURTH DEGREE, GIVE:		IF NATURALIZATION HAVE FINAL PAPERS BEEN RECEIVED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		<input type="checkbox"/> DEATH _____ mo day yr	
INITIATION DATE OF _____		TERMINATION DATE OF _____		ASSEMBLY NUMBER _____ CITY _____ ST/PROV. _____	
REASON FOR TERMINATION _____		ASSEMBLY _____ NUMBER _____		CITY _____ ST/PROV _____	
PARISH <input checked="" type="checkbox"/>		NEW OR PRESENT <input checked="" type="checkbox"/>		FORMER <input type="checkbox"/>	
I HEREBY DECLARE THAT THE ABOVE IS TRUE AND CORRECT AND THAT I AM A PRACTICAL CATHOLIC IN COMMUNION WITH THE HOLY SEE.		I CERTIFY THAT THE APPLICANT IS A THIRD DEGREE MEMBER IN GOOD STANDING			
SIGNATURE OF APPLICANT _____ DATE _____		IN <input checked="" type="checkbox"/> COUNCIL NO. _____		LOCATION _____	
SIGNATURE OF PROPOSER _____ ASSEMBLY _____		DATE _____		SIGNATURE OF FINANCIAL SECRETARY _____	
PROPOSER MEMBER NUMBER (REQUIRED) _____		RECEIVED FEES OF \$ _____ DATE _____			
FAITHFUL NAVIGATOR <input checked="" type="checkbox"/> DATE _____		APPLICANT INITIATED AT _____ DATE _____			
FAITHFUL COMPTROLLER <input checked="" type="checkbox"/> DATE _____		Signature of Master (required for new members only) _____			