MYRA GRAND CHAPTER – OES PHA

## ANNUAL RETURNS

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Chapter No.: \_\_\_\_\_\_\_\_\_\_\_\_\_

Charter Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Meeting Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State and Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Day and Time of Meeting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For the year beginning ***November 1, 2017***and closing ***October 31, 2018***

Officers elected \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_, and installed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Worthy Matron** | **Phone** |
| **Address** |
| **Worthy Patron** | **Phone:** |
| **Address** |
| **Associate Matron** | **Phone:** |
| **Address** |
| **Associate Patron** | **Phone:** |
| **Address** |
| **Conductress** | **Phone** |
| **Address** |
| **Associate Conductress** | **Phone:** |
| **Address** |
| **Financial Secretary** | **Phone:** |
| **Address** |
| **Recording Secretary** | **Phone:** |
| **Address** |
| **Treasurer** | **Phone:** |
| **Address** |
| **Chairman of Trustees** | **Phone:** |
| **Address** |
| **Trustee 2 Year** | **Phone:** |
| **Address** |
| **Trustee 3 Year** | **Phone:** |
| **Address** |

**MGC Annual Returns Form #1 Page 1**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Chapter No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## APPOINTED OFFICERS

|  |  |
| --- | --- |
| **Marshal** | **Phone:** |
| **Address** |
| **Musician** | **Phone:** |
| **Address** |
| **Christian Flag Bearer** | **Phone:** |
| **Address** |
| **US Flag Bearer** | **Phone:** |
| **Address** |
| **OES Flag Bearer** | **Phone:** |
| **Address** |
| **Chaplain** | **Phone:** |
| **Address** |
| **Warder** | **Phone:** |
| **Address** |
| **Sentinel** | **Phone:** |
| **Address** |
| **Adah** | **Phone:** |
| **Address** |
| **Ruth** | **Phone:** |
| **Address** |
| **Esther** | **Phone:** |
| **Address** |
| **Martha** | **Phone:** |
| **Address** |
| **Electa** | **Phone:** |
| **Address** |
| **Ways & Means Chairman** | **Phone:** |
| **Address** |
| **Ways & Means Co-Chairman** | **Phone:** |
| **Address** |
| **MGC Annual Returns Form #2 Page 2** |

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### LIST OF MEMBERS

**List Alphabetically All Living Members and Present Officers**

#### Sisters First – Brothers Last

|  |  |
| --- | --- |
| **Name:**  | **Phone:** |
| **Address:**  |
| **Name:**  | **Phone:** |
| **Address:**  |
| **Name:**  | **Phone:** |
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| **Address:**  |
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| **Address:**  |
| **MGC Annual Returns Form #3 (May be duplicated for additional names) Page 3** |

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### PAST MATRONS and PAST PATRONS

##### List Names Alphabetically – Past Matrons First, then Past Patrons

|  |  |
| --- | --- |
| Name (Last, First MI) | Name (Last, First MI) |
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**MGC Annual Returns Form #4 Page 4**

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### PAST GRAND OFFICERS

##### Print alphabetically names with titles and year served

|  |  |  |
| --- | --- | --- |
| **Name** | **Position(s) Held** | **Year Served** |
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**MGC Annual Returns Form #5 Page 5**

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### DEGREES CONFERRED (provide dates)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** (Last, First Middle Initial) | **Eastern Star Degree** | **Queen of the South Degree** | **Amaranth Degree** | **Healed** |
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**MGC Annual Returns Form #6 Page 6**

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### OTHER ACTIONS

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Affiliated** | **Demitted** | **Rejected** | **Withdrawal** | **Dropped** | **Suspended** | **Expelled** | **Death** |
| **IN** | **OUT** |
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**MGC Annual Return Form #7 Page 7**

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### MEMBERS EXEMPTED FROM GRAND CHAPTER TAXES

List Names, Addresses and Dates Exempted (**90 years of age or 50 years of consecutive service ONLY**)

|  |  |
| --- | --- |
| **Name** | **Date Exempted** |
| **Address** |
| **Name** | **Date Exempted** |
| **Address** |
| **Name** | **Date Exempted** |
| **Address** |
| **Name** | **Date Exempted** |
| **Address** |
| **Name** | **Date Exempted** |
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| **Name** | **Date Exempted** |
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| **Name** | **Date Exempted** |
| **Address** |
| **Name** | **Date Exempted** |
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| **Name** | **Date Exempted** |
| **Address** |

**MGC Form 8 Page 8**

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RECAPITULATION

**Additions** **Deductions**

Number Initiated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number Deceased: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number Reinstated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number Suspended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number Affiliated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number Expelled: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number Restored: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number Dropped: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number Demitted In: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number Demitted Out: \_\_\_\_\_\_\_\_\_\_\_\_\_

 Total Additions: \_\_\_\_\_\_\_\_\_\_\_\_ Total Deductions: \_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### SUMMARIZATION

Number of members returned last year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Plus total additions (above): \_\_\_\_\_\_\_\_\_\_\_\_\_

 Sub-total: \_\_\_\_\_\_\_\_\_\_\_\_\_

Less Total Deductions (above): \_\_\_\_\_\_\_\_\_\_\_\_\_

Present Membership:

(Should agree with number of members reported on form #3 \_\_\_

No. of female members\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No. of male members\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### FINANCIAL STATEMENT OF THE CHAPTER

Balance Brought Forward November 1, 20\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Receipts Received during fiscal year 20\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dues $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Activities $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Donations, etc. $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Expenditures during fiscal year $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Grand Lodge Maintenance Tax $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Status as of October 31, 20\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Savings $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Checking $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Paraphernalia $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Monetary Worth of Chapter $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MGC Annual Returns Form #9 Page 9**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Chapter No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Membership: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exempt Members (non taxable):

* Age 90 or 50+ years of consecutive Service \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Taxable members (effective 1 November): ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
|  |

We hereby certify that the forgoing is a true statement to the work done in

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Chapter No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For the year beginning \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_, and ending \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

In witness thereof, we, herewith, ascribe our names and affix the seal of the Chapter

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Retiring Worthy Matron

Seal

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Retiring Financial Secretary

Countersign:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Worthy Matron (elect)** **Financial Secretary (elect)**

|  |
| --- |
| **FOR GRAND CHAPTER SECRETARY OFFICE ONLY** |

Date Returns Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Grand Secretary Grand Financial Secretary

**MGC Annual Returns Form #10 Page 10**