**Myra Grand Chapter**

**Order of the Eastern Star, P.H.A.**

**Jurisdiction of Maryland**

|  |  |
| --- | --- |
| **Date:** |  |
|  | **Chapter No.** |  |

QUARTERLY PER CAPITA TAX REPORT

# For period ending **(Please check One)**

#  **January 31 April 30 July 31 October 31**

|  |  |
| --- | --- |
| **(1)** Number of members reported Annual Grand Session **November:** |  |

1. **ADDITIONS**

|  |  |  |
| --- | --- | --- |
| Initiated |  |  |
| Reinstated |  |  |
| Affiliated |  |  |
| Restored |  |  |
| Demitted (in) |  |  |
| **(2)** | Total additions: |  |  |
| **(3)** | Add line (1) and line (2) |  |  |

## DEDUCTIONS

|  |  |  |
| --- | --- | --- |
| Deceased |  |  |
| Expelled |  |  |
| Demitted (out) |  |  |
| Suspended |  |  |
| **Year-End Reporting** (Shaded deductions can only be included on 10/31 report) |  |  |
|  | Dropped  |  |  |
|  | Withdrawals (Dropped at Own Request)  |  |  |
| **(4)** | Total Deductions |  |  |
|  |  |  |  |
| **(5)** | **Taxable Membership Line (3) minus Line** **(4)** |  |  |
|  |  |  |  |
| **(6)** | Per Capita Tax **[ line (5) x $3.50** ] |  | **$** |

1. **EXEMPTED from Chapter Dues/Assessments.**

**All payments to Myra are still required (Please select only one)**

|  |  |  |
| --- | --- | --- |
| Age 90 or 50 or more Years of Consecutive Service |  |  |
| Past Grand Matrons |  |  |
| Past Grand Patrons |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| SEAL |  | Worthy Matron |
|  | **Worthy Patron** |
|  | **Financial Secretary** |
|  | **Address** |
|  |  |

|  |
| --- |
| **DO NOT WRITE BELOW** |
| **Date Received** |  |  | **Amount**  | **$** | **Check No.** |  |

|  |  |
| --- | --- |
|  | Grand Secretary |
|  | Grand Financial Secretary |
|  | **Grand Chairman Of Returns Committee** |

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