

ANNUAL REPORT

Chapter _____ No _____

From January 1, _____ Through December 31, _____

Membership Count at Beginning of Year..... _____

Number Initiated: _____

Number Affiliated: _____

Number Reinstated: _____

Number Gained By consolidation: _____

Total Gained (add 1 thru 4) (+) _____

Number Died: _____

Number Demitted: _____

Number Suspended: _____

Number Expelled or Lost: _____

Total Lost (add 5 thru 8) (-) _____

Membership Count at End of Year..... _____

GRAND CHAPTER DUES:

_____ Number of Members at Beginning of Year @ \$5.00 \$ _____
(Per Capita Fee)

_____ Number of Members Initiated/Affiliated During Year @ \$5.00 \$ _____

Total Money Due Grand Chapter \$ _____

Make Check Payable to Grand Chapter of NH, OES and mail to the Grand Secretary BEFORE February 15

- Total Number of Dues Cards Sheets (8 cards per sheet) needed for new year _____ (Sheets)
- Attach a list of members to receive Membership Certificates this year -- include name, if past officer and years of membership. Also for 50 and above these certificates may be given at Grand Chapter. Please let me know if the member would like to attend Grand Chapter to receive their certificate.

Worthy Matron's Signature

Secretary's Signature & Seal

Addition of Membership by Initiation (list in order of date initiated):

Name	Effective Date	Name	Effective Date

Addition of Membership by Affiliation (list in order of date affiliated):

Name	Effective Date	Name	Effective Date

Addition of Membership by Reinstatement (list in order of date of vote):

Name	Effective Date	Name	Effective Date

Addition of Membership by Consolidation (list in alphabetical order):

Please attach a list of the members you gained from consolidation.

Loss of Members by Death (list in order of date of death):

Name	Effective Date	Name	Effective Date

Demitted Members (list in order of date demitted):

Name	Effective Date	Name	Effective Date

Suspended Members (list in order of date suspended):

Name	Effective Date	Name	Effective Date

Expelled Members (list in order of date expelled):

Name	Effective Date	Name	Effective Date

Rejected Petitioners (list in order of date rejected):

Name	Effective Date	Name	Effective Date

Installation Report

Chapter _____

No _____

Date of Chapter Institution: _____

Date of Chapter Chartering: _____

County of _____, State of New Hampshire

Months of Stated Meetings: _____

Time of Meeting: _____

Chapter Mailing Address: C/O _____, Secretary

Officers Installed to Serve Chapter this Year

Worthy Matron	
Worthy Patron	
Associate Matron	
Associate Patron	
Secretary	
Treasurer	
Conductress	
Chaplain	
Marshal	
Organist	
Adah	
Ruth	
Martha	
Electa	
Warder	
Sentenel	

Please Remember to Fill in These Two Names

Grand Chapter Delegate	
Grand Chapter Alternate Delegate	