



TO THE WORTHY MATRON AND SECRETARY

On or before the 31<sup>st</sup> of January, forward to the Grand Secretary this statistical report for the preceding year, signed by the Worthy Matron and Secretary. Before beginning this report, make additional blank copies if you feel you will need them. Make the report in duplicate and keep one copy for your own Chapter files.

Enter the names of EVERY MEMBER of the Chapter in ALPHABETICAL order under the heading of "Names of Members" on page 2. Please type or use a computer. Put the surname first, then the given name in full. Example: Adams, Mary Q. Add the letters PM or PP after each Past Matron or Past Patron. If such title came through service in another Chapter or Grand Jurisdiction, that Chapter or Jurisdiction must also be designated. Example: Adams, Mary Q., PM # \_\_\_\_ (the chapter number), indicating the other Idaho chapter in which this member has been Worthy Matron, or Adams, Mary Q., PM-\_\_ (the two-letter state abbreviation), indicating the other Grand Jurisdiction in which this member has been Worthy Matron. Also use the letters VPL to designate Voluntary Prepaid Life members; GS for fifty year members; DM1 for dual members for whom you are the primary chapter; DM2# \_\_\_\_ (the chapter number) indicating the primary chapter for dual members for whom you are the secondary chapter and the primary chapter is another Idaho chapter, or DM2\_\_ (the two-letter state abbreviation) for dual members for whom you are the secondary chapter and the primary chapter is in another Grand Jurisdiction.

If there is a member that you have been unable to locate, report this member on page 9. Report the name change of any member on page 9. It is very difficult to follow members through the Grand Chapter records if these name changes are not recorded.

Figure the per capita tax on EVERY MEMBER of the Chapter as per your alphabetical listing on page 2. Be sure your recapitulation tallies with the items on each of the pages. Include a check for the per capita tax of \$7.<sup>00</sup> per member (Code & Digest Article IV.1.A - page 12) and International Temple monies. A fine of \$2.<sup>50</sup> per day up to \$50.00 will be charged for the late submission of this report (Code & Digest Article XI,C,1 - page 50). Remember to affix the Chapter Seal and the signatures of the Worthy Matron and the Chapter Secretary.

Any Chapter failing to submit this report shall not be allowed representation in the Grand Chapter. A Chapter failing to do so for two (2) consecutive years shall forfeit its Charter, and its effects shall revert to the Grand Chapter. (Code & Digest Article 1.E - page 35).

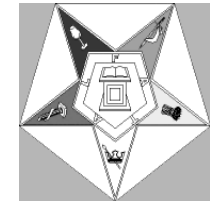
Do not fail to place the Chapter Seal on the Report  
This report must be signed by the Worthy Matron and the Secretary

Annual Returns

to the

Grand Chapter of  
Idaho

Order of the Eastern  
Star



\_\_\_\_\_ Chapter

# \_\_\_\_\_

Charter dated

\_\_\_\_\_, \_\_\_\_\_

Held at \_\_\_\_\_,  
Idaho

County of \_\_\_\_\_

For the year ending December 31,

\_\_\_\_\_

Date and Time of  
Meetings

|||||

Received and filed in the  
office of the Grand  
Secretary

this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_

**Page 1      REPORT FOR THE YEAR 2008**  
Commencing January 1 and ending December 31

The following Officers were elected or appointed at the Stated Meeting held on \_\_\_\_\_ and were installed into office on \_\_\_\_\_ as follows:

Worthy Matron:

Worthy Patron:

Associate Matron:

Associate Patron:

Secretary:

Treasurer:

Conductress:

Associate Conductress:

Chaplain:

Marshal:

Organist:

Adah:

Ruth:

Esther:

Martha:

Electa:

Warder:

Sentinel:

Remarks:

**Page 2 NAMES OF MEMBERS (list alphabetically)**

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

**RECORD OF INITIATIONS**

To be entered also with List of Members

- A. Give full name: Adams, Mrs. Mary Q.
- B. Present address: Street, City, State and Zip Code
- C. Date of Initiation: Month, Day and Year
- D. Place of Birth: City and State
- E. Masonic Relationship: Name of Person, Relationship, Lodge Name & No., City and State

1. A. \_\_\_\_\_  
B. \_\_\_\_\_  
C. \_\_\_\_\_ D. \_\_\_\_\_  
E. \_\_\_\_\_

2. A. \_\_\_\_\_  
B. \_\_\_\_\_  
C. \_\_\_\_\_ D. \_\_\_\_\_  
E. \_\_\_\_\_

3. A. \_\_\_\_\_  
B. \_\_\_\_\_  
C. \_\_\_\_\_ D. \_\_\_\_\_  
E. \_\_\_\_\_

4. A. \_\_\_\_\_  
B. \_\_\_\_\_  
C. \_\_\_\_\_ D. \_\_\_\_\_  
E. \_\_\_\_\_

5. A. \_\_\_\_\_  
B. \_\_\_\_\_  
C. \_\_\_\_\_ D. \_\_\_\_\_  
E. \_\_\_\_\_

**RECORD OF AFFILIATIONS &/OR DUAL MEMBERSHIPS**

(For this year only)

To be entered also with List of Members

- A. Give full name: Adams, Mrs. Mary Q.
- B. Present address: Street, City, State and Zip Code
- C. Date of Affiliation: Month, Day and Year
- D. Date of Demit (if applicable): Month, Day and Year
- F. Dual Membership: Yes or No
- G. Chapter from: Name, No. and State
- H. Place of Birth: City and State

- 1. A.
- B.
- C.
- F.
- G.

D. E.

- 2. A.
- B.
- C.
- F.
- G.

D. E.

- 3. A.
- B.
- C.
- F.
- G.

D. E.

**RECORD OF REINSTATEMENTS**

To be entered also with List of Members

A. Give full name

B. Date: Month, Day and Year

1. A.

B.

2. A.

B.

3. A.

B.

4. A.

B.

5. A.

B.

6. A.

B.

**RECORD OF DEMITS**  
To be entered here only.

A. Give name in full

B. Date: Month, Day and Year

1. A.

B.

2. A.

B.

3. A.

B.

4. A.

B.

**RECORD OF SUSPENSIONS - Non-Payment of Dues**

To be entered here only.

A. Give name in full

B. Date: Month, Day and Year

1. A.

B.

2. A.

B.

3. A.

B.

4. A.

B.

5. A.

B.

6. A.

B.

7. A.

B.

8. A.

B.

9. A.

B.

10.A.

B.

**RECORD OF DEATHS**  
To be entered here only

A. Give name in full

B. Date: Month, Day and Year

- |        |    |
|--------|----|
| 1. A.  | B. |
| 2. A.  | B. |
| 3. A.  | B. |
| 4. A.  | B. |
| 5. A.  | B. |
| 6. A.  | B. |
| 7. A.  | B. |
| 8. A.  | B. |
| 9. A.  | B. |
| 10. A. | B. |
| 11. A. | B. |
| 12. A. | B. |

**Page 9**

**EXPELLED, WITHDRAWN OR SUSPENSION FOR OTHER CAUSES  
UNABLE TO LOCATE**

To be entered here only

A. Name                      B. Date in Full                      C. Cause

1. A. \_\_\_\_\_ B. \_\_\_\_\_

C. \_\_\_\_\_

2. A. \_\_\_\_\_ B. \_\_\_\_\_

C. \_\_\_\_\_

If more to be listed, continue on Page 9 - A

**Page 10**

**RECORD OF REJECTIONS**

To be entered here only.

A. Give full name                      B. Date: Month, Day and Year

1. A. \_\_\_\_\_ B. \_\_\_\_\_

2. A. \_\_\_\_\_ B. \_\_\_\_\_

If more rejections, list on Page 10 - A

**Page 11**

**CHANGE OF NAME OF ANY MEMBER SINCE LAST REPORT**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

**Page 12 RECAPITULATION**

Name of Chapter \_\_\_\_\_ No. \_\_\_\_\_ Location \_\_\_\_\_

Number of Members on Last Report \_\_\_\_\_

Number Initiated – Page 3 \_\_\_\_\_

Number Affiliated – Page 4 \_\_\_\_\_

Number Reinstated – Page 5 \_\_\_\_\_

Total Increase During the Year \_\_\_\_\_ Subtotal \_\_\_\_\_

Number Demitted – Page 6 \_\_\_\_\_

Number Suspended – Page 7 \_\_\_\_\_

Number Deceased – Page 8 \_\_\_\_\_

Number Expelled – Page 9 \_\_\_\_\_

Number Unable to Locate – Page 9 \_\_\_\_\_

Total Decrease During the Year \_\_\_\_\_

**Present Membership**

Number Rejected – Page 10 \_\_\_\_\_

Total # Primary Dual Members \_\_\_\_\_

Total # Secondary Dual Members \_\_\_\_\_

Total # Fifty Year Members \_\_\_\_\_

Grand Chapter Per Capita Tax Due (Figure Per Capita on every member of the Chapter)

On \_\_\_\_\_ Members at \$7.00 each \$ \_\_\_\_\_

Amount Delinquent for Year \_\_\_\_\_ \$ \_\_\_\_\_

**Total Remittance for Per Capita Tax** \$ \_\_\_\_\_

I certify the foregoing report to be correct and true. WITNESS My Hand and Seal of our Chapter this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Seal

\_\_\_\_\_  
Chapter Secretary

I certify that I have carefully examined the foregoing report and find it to be correct.

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Worthy Matron