

MEMBER ACTIVITY REPORT

(USE ONLY FOR CHANGE OF STATUS- SEE BACK OF PAGE FOR MORE AFFILIATION AND REINSTATEMENT INFORMATION)

INDIANA GRAND CHAPTER ORDER OF THE EASTERN STAR

POBox86

Franklin, Indiana 46131

Chapter Name _____ Chapter Number _____ Month _____ year _____

MEMBER NAME & ADDRESS			NEW MEMBER INITIATION DATE	MEMBER AFFILIATED *SEE BACK*** DATE	AFFILIATED DUAL MEMBER *SEE BACK*** DATE	DECEASED DATE	DEMITTED DATE	SUSPENDED DATE	REINSTATED *SEE BACK* DATE
LAST	FIRST	MIDDLE							
ADDRESS:									
LAST	FIRST	MIDDLE							
ADDRESS:									
LAST	FIRST	MIDDLE							
ADDRESS:									
LAST	FIRST	MIDDLE							
ADDRESS:									

A COPY OF THIS REPORT SHOULD BE RETAINED FOR YOUR RECORDS.

Signature of Secretary _____ Date _____