

SUMMARY OF QUARTERLY REPORTS

April 1, 20 _____ to March 31, 20 _____

Inst. No. _____ Grand Director _____

REPORT	Rec'd	Ret'd	Rec'd	Approved
JUN	_____	_____	_____	_____
SEP	_____	_____	_____	_____
DEC	_____	_____	_____	_____
MAR	_____	_____	_____	_____
Remarks	_____			

Meeting Date(s) _____

Exceptions _____

Filed: 990N Yes No CA-199N Y / N

Dues: Beneficial \$ _____ Associate \$ _____

Initiation fee: \$ _____

Banks of Deposit _____

Amt of Constitutional Requirement \$ _____

By-Laws Updated: _____

		Receipts	Disbursements	Remaining at end of Quarter			Amount in Bonds, etc.			Amount in Checking	
		Amount Brought Fwd. \$									
JUN	\$		\$	\$	JUN	\$		\$	\$		
SEP	\$		\$	\$	SEP	\$		\$	\$		
DEC	\$		\$	\$	DEC	\$		\$	\$		
MAR	\$		\$	\$	MAR	\$		\$	\$		
Amount Due - Taxes & Assessments					Arrearage						
		Death Assessment	Grand Institute Assessment	Per Capita Tax		Number of Beneficial			Number of Associate		Total in Arrears
JUN	\$		\$	\$	JUN						
SEP	\$		\$	\$	SEP						
DEC	\$		\$	\$	DEC						
MAR	\$		\$	\$	MAR						

MEMBERSHIP

	Initiated			Reinstated			Rec'd by Trans.		Resigned			Susp.		Expelled			Died			Trans. to other Inst.		Trans. A to B		Trans. B to A		Transfer to / from Honorary (use +/-)					
	B	A	H	B	A	H	B	A	B	A	H	B	A	B	A	H	B	A	H	B	A	A	B	B	A	B	A	H			
Forward																															
JUN																															
SEP																															
DEC																															
MAR																															
TOTAL																															

	MEMBERSHIP at end of quarter				Institute Deputy			
	B	A	H	Total	Name			
Forward					Name			
JUN					Address			
SEP					Phone			
DEC					E-Mail			
MAR					Board of Trustees' Chairman			
TOTAL					Name			
					Address			
					Phone			
					E-Mail			