

ANNUAL RETURN
GRAND CHAPTER OF MISSOURI - OES
For the Year Ending, December 31, 2011
By
Chapter & No.
District -
Institution Date -
Constitution Date -
Date of Charter -
Where located-City-State
CHAPTER OFFICERS(Dec. 31, 2011 )
Worthy Matron
Worthy Patron
Associate Matron
Associate Patron
Secretary
Treasurer
Conductress
Associate Conductress
Chaplain
Marshal
Organist
Adah
Ruth
Esther
Martha
Electa
Warder
Sentinel
-1-

	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last			
<i>first and Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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-2-			

	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
<b>Please write names, ALPHABETICALLY, Last names</b>			
<b>first and <i>Prefix Miss or Mrs. To Names of Sisters</i></b>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
<i>first and Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
<b>Please write names, ALPHABETICALLY, Last names</b>			
<b>first and <i>Prefix Miss or Mrs. To Names of Sisters</i></b>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
<i>first and Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
81			
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
<i>first and Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
101			
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
first and <i>Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
121			
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Chapter & No.			
ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS			
Please write names, ALPHABETICALLY, Last names			
first and <i>Prefix Miss or Mrs. To Names of Sisters</i>			
	Names	PM	PP
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
first and <i>Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
<b>Please write names, ALPHABETICALLY, Last names</b>			
<b>first and <i>Prefix Miss or Mrs. To Names of Sisters</i></b>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
<b>Please write names, ALPHABETICALLY, Last names</b>			
<b>first and <i>Prefix Miss or Mrs. To Names of Sisters</i></b>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
<b>Please write names, ALPHABETICALLY, Last names</b>			
<b>first and <i>Prefix Miss or Mrs. To Names of Sisters</i></b>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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-13-			

	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
<i>first and Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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Chapter & No.			
ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS			
Please write names, ALPHABETICALLY, Last names			
first and <i>Prefix Miss or Mrs. To Names of Sisters</i>			
	Names	PM	PP
261			
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-15-			

	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
<i>first and Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
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-16-			

	<b>Chapter &amp; No.</b>		
<b>ROLL OF MEMBERSHIP, INCLUDING ALL DUAL MEMBERS</b>			
Please write names, ALPHABETICALLY, Last names			
<i>first and Prefix Miss or Mrs. To Names of Sisters</i>			
	<b>Names</b>	<b>PM</b>	<b>PP</b>
301			
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-17-			

## Chapter & No.

DUAL MEMBERS AFFILIATED JAN 1 - DEC 31, 2011

Please write Names ALPHABETICALLY: Last name first  
and given Name in Full - DO NOT USE INITIALS.

Prefix Miss or Mrs. To Names of Sisters.

Affiliation Date

		Mon.	Day	Yr
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## Chapter & No.

### From what Chapter - State Date of Initiation.

This should be recorded on the Certificate of Good Standing presented with Petition.

		Chapter	Date	Ltr.Good
	Grand Jurisdiction	No.	Initiated	Standing
1				
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<b>List those holding DUAL MEMBERSHIP in your</b>			
<b>Chapter as of December 31, 2011</b>			
	<b>Chapter &amp; No.</b>		
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<b>Name of those who WITHDREW DUAL Membership</b>			
<b>during 2011. Indicate if they Withdrew Dual to</b>			
<b>become PRIMARY members.</b>			
		Month	Day
		Year	
1			
2			
3			
4			
-20-			

The following have received the DEGREES from Jan 1				
through Dec. 31, 2011. Please give date of Initiation and				
<i>Prefix Miss or Mrs. To Names of Sisters</i>				
Chapter & No.		Initiated		
NAME	Month	Day	Year	
1				
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-21-				

<b>AFFILIATIONS/CONSOLIDATIONS</b>			
January 1 - December 31, 2011			
We must know date of Affiliation			
<b>Chapter &amp; No.</b>		<b>Affiliation Date</b>	
		Month	Day
		Year	
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**AFFILIATIONS/CONSOLIDATIONS**

	<b>Chapter &amp; No.</b>			
	<b>From Grand</b>	<b>Chapter</b>	<b>Date</b>	<b>Date Demit</b>
	<b>Jurisdiction</b>	<b>&amp; No.</b>	<b>Initiated</b>	
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**Names of all Members Suspended for Non-Payment  
of Dues, June 1, 2011, all provisions in Chapter B, ART XVI, Sec1  
having been complied with(Read Carefully.)**

**Chapter & No.**

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-24Jun	

**List of Members REINSTATED from Jan 1:**

thru Dec 31, 2011, and Date of Reinstatement. State if automatically reinstated. Prefix Miss or Mrs. To Names of Sisters. Read last sentence, first paragraph of Chapter A, Art XIV, Sec. 1, Const. & By-Laws.

**Chapter & No.**

	<u>NAME</u>	Date Reinstated		
		Month	Day	Year
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	-25-			

**List of Members Demitted from Jan 1 thru Dec 31, 2011**

and the DATE THEY DEMITTED.

*Prefix Miss or Mrs. To Names of Sisters.*

	<b>Chapter &amp; No.</b>			
		<b>Month</b>	<b>Day</b>	<b>Year</b>
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<b>List of Members who have DIED Jan 1- Dec 31, 2011</b>				
<b>and date of Death. Prefix Miss or Mrs. To Names of Sisters</b>				
<b>Chapter &amp; No.</b>				
		<b>Date of Death</b>		
		Month	Day	Year
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**Sisters who have changed their Name by Marriage or Otherwise. Give both of her Names (as Mary "Brown" White)**

**Chapter & No.**

	<b>Miss or</b>	<b>Christian</b>	<b>Former</b>	<b>Present</b>
	<b>Mrs.</b>	<b>Name</b>	<b>Surname</b>	<b>Surname</b>
1				
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**Rejections of Petitions - Jan 1 - Dec 31, 2011**

1				
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6				

	Names of those who by mistake were NOT			
	REPORTED AS LEAVING last year (2010). State			
	whether Demitted, Suspended, Expelled or			
	Died and DATE.			
<b>Chapter &amp; No.</b>				
		Mon.	Day	Year
1				
2				
3				
4				
<b>Names of Members who by mistake were LEFT OFF</b>				
<b>(2010). State whether the members were Initiated,</b>				
<b>Affiliated or Reinstated. If Affiliated, give Name,</b>				
<b>Number, and Jurisdiction of Chapter from which they</b>				
<b>Affiliated.</b>				
	Name	Mon.	Day	Year
1				
2				
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4				
<b>Names of those SUSPENDED FOR IMMORAL CONDUCT</b>				
<b>from Jan 1 to Dec 31, 2011 and Date of Suspension.</b>				
1				
2				
3				
<b>Names of those EXPELLED Jan 1 to Dec 31, 2011</b>				
<b>and date of Expulsion. Prefix Miss or Mrs. To names</b>				
<b>of Sisters.</b>				
1				
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**BROTHERS WHO HAVE LOST MASONIC AFFILIATION**

**Chapter "B", Art VIII, Sec. 6 - Jan 1 thru Dec 31, 2011**

**Chapter & No.**

1

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6

**Names of Members whose Dues have been remitted for**

**Inability to pay - Jan 1 thru Dec 31, 2011. Chapter**

**must pay Dues to Grand Chapter @ \$4.40 each Member**

1

2

3

4

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8

**PER CAPITA MUST BE PAID ON THESE MEMBERS PER GENERAL**

**GRAND CHAPTER, EFFECTIVE DEC 31, 2004.**

	<b>INTERNATIONAL HEADQUARTERS</b>
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<b>New Members (Degrees, Affiliated or Dual Members Affiliated)</b>
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<b>General Grand Chapter Law changed at the 2003 Session.</b>
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<b>The Assessment is now \$5.00 per new member, as above, once in a lifetime.</b>
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<b>Chapter &amp; No.</b>
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List all new members who came into your Chapter
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during 2011 as Initiated, Affiliated or took Dual
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Membership. Please include the total of these new
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members on Page No. 35 and include \$5.00 per
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member with your Per Capita Tax check.
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<b>FINAL RECAP - CHAPTER &amp; No.:</b>	
Number of Sisters	
Number of Brothers	
Total Members	
PER CAPITA MUST BE PAID ON ALL MEMBERS ON YOUR ROLLS AS OF DECEMBER 31, 2011	
Total Membership on which to Pay Per Capita to Grand Chapter (The same number as line No. 18 - Page No.34 and the total membership listed above. This is per General Grand Chapter.)	
Pay to - Grand Chapter of MO OES	
Dues on (     ) Members @ \$4.40 each	
Arrears on (     ) Mbrs @ \$4.40 each	
Arrears on(     ) Mbrs left off Report last year @ \$4.40 each	
Fidelity Bond(Chapter "B", ART III,Secx32)	
International Headquarters Assessment \$5.00 (After 11/10/2003) Per New Members - Once in a lifetime. Total members listed on page 31. (     )Members @ \$5.00 each	
Total Dues, Fidelity Bond & International Headquarters	
Make check or money order payable to Grand Chapter of Missouri, O.E.S. DO NOT INCLUDE SUPPLY OR PROJECT MONEY WITH THIS CHECK.	
This space to be filled in by the Grand Secretary Report and Dues received (     ), 2012	
-35-	

<b>FINANCIAL STATEMENT (COMPLETE IN FULL)</b>	
<b>Chapter &amp; No.</b>	
Amt. in General Fund, Dec 31, 2011	
Per Capita Fund - Chapter "A", 2nd Para.	
ART XIV, Sec. 1	
Other Funds	
Amount invested in stocks, bonds or	
other Securities.	
Annual Dues Charged by your Chapter	
Per member as per your By-Laws	
Chapter "B", ART III, Sec 32	
Initiation Fee Charged by your Chapter	
As Per your By-Laws - Chapter "B"	
ART III, Sec 32, ART VI, Sec. 1	
I. R. S. Number (Form No. 990)	
Our Stated Meetings are held on the	
1st and 3rd	
2nd and 4th	
Once A Month (Date)	
Address where meetings are held.	
DATE OF ANNUAL ELECTION	
September _____, 2011	

<b>Chapter &amp; No.</b>
December 31, 2011
City
County
We hereby certify that the return herewith submitted is correct in every particular and that EACH BLANK has been properly completed.
<b>SIGN IN INK</b>
Worthy Matron
Street
City,State&Zip Code
Worthy Patron
Street
City,State&Zip Code
ATTEST:
Miss-Mrs-Mr. Secretary
Street
City,State&Zip Code
Telephone No. (Area Code & No.)
*****BE SURE TO AFFIX SEAL*****
(Seal)
-37-





