

PALMETTO GRAND COMMANDERY  
of SOUTH CAROLINA, PHA

**ANNUAL REPORT**

FROM.....COMMANDERY No.....

City.....District No.....County.....South Carolina

Grand Commandery Dues \$9.00 ea. \$..... Education \$1.00 ea. \$.....

Total Grand Commandery Dues \$.....

For Year beginning Nov 1, 20..... And Ending Oct 31, 20.....

| OFFICERS | G.C.<br>DU<br>ES | YEAR<br>JOINED | BENEFICIARY |
|----------|------------------|----------------|-------------|
| 1.       |                  |                |             |
| 2.       |                  |                |             |
| 3.       |                  |                |             |
| 4.       |                  |                |             |
| 5.       |                  |                |             |
| 6.       |                  |                |             |
| MEMBERS  |                  |                | BENEFICIARY |
| 7.       |                  |                |             |
| 8.       |                  |                |             |
| 9.       |                  |                |             |
| 10.      |                  |                |             |
| 11.      |                  |                |             |
| 12.      |                  |                |             |
| 13.      |                  |                |             |
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| 18.      |                  |                |             |
| 19.      |                  |                |             |
| 20.      |                  |                |             |
| 21.      |                  |                |             |
| 22.      |                  |                |             |
| 23.      |                  |                |             |

| MEMBERS | G.C.<br>DU<br>ES | YEAR<br>JOINED | BENEFICIARY |
|---------|------------------|----------------|-------------|
| 24.     |                  |                |             |
| 25.     |                  |                |             |
| 26.     |                  |                |             |
| 27.     |                  |                |             |
| 28.     |                  |                |             |
| 29.     |                  |                |             |
| 30.     |                  |                |             |
| 31.     |                  |                |             |
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| 48.     |                  |                |             |
| 49.     |                  |                |             |
| 50.     |                  |                |             |
| 51.     |                  |                |             |
| 52.     |                  |                |             |
| 53.     |                  |                |             |
| 54.     |                  |                |             |
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| 56.     |                  |                |             |
| 57.     |                  |                |             |
| 58.     |                  |                |             |
| 59.     |                  |                |             |
| 60.     |                  |                |             |

|                                       |  |      |                   |
|---------------------------------------|--|------|-------------------|
| ROSTER OF NEW MEMBERS FROM<br>NO..... | BE SURE TO FILL IN THIS SPACE FOR NEWLEY ELECTED<br>OFFICERS FOR 20..... |      |                   |
|                                       | EMINENT COMMANDER  |      |                   |
|                                       | ADDRESS:   |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       | SECRETARY  |      |                   |
|                                       | ADDRESS:   |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       | REINSTATED SINCE LAST REPORT   |      |                   |
|                                       |  |      |                   |
|                                       | NAMES  | DATE | BACK DUES<br>PAID |
|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |
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|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       | RECAPITULATION   |      |                   |
|                                       | MEMBERS REPORTED LAST YEAR _____   |      |                   |
|                                       | SUSPENDED DURING THIS YEAR _____   |      |                   |
|                                       | DIED DURING THIS YEAR _____  |      |                   |
|                                       | MEMBER BALANCE _____   |      |                   |
|                                       | REINSTATED DURING LAST YEAR _____  |      |                   |
|                                       | ADMITTED _____   |      |                   |
|                                       | INITIATED DURING LAST YEAR _____   |      |                   |
|                                       | TOTAL NUMBER BENEFICIAL MEMBERS THIS REPORT _____                        |      |                   |
|                                       | AMMOUNT DUE GRAND COMMANDERY _____                                       |      |                   |
|                                       | AMOUNT BACK DUES _____   |      |                   |
|                                       | EDUCATION _____  |      |                   |
|                                       | GRAND TOTAL _____  |      |                   |
|                                       | SIGNED _____ E COMMANDER   |      |                   |
|                                       | ADDRESS _____  |      |                   |
|                                       | ATTEST: _____ SECRETARY  |      |                   |
|                                       | ADDRESS: _____   |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |
|                                       |  |      |                   |

