

Set No. \_\_\_\_\_ of \_\_\_\_\_ KNIGHT TEMPLAR MEMBERSHIP

REPORT, MONTH OF \_\_\_\_\_ 20\_\_\_\_\_

TOTAL MEMBERS ON LAST MONTH'S REPORT \_\_\_\_\_

From \_\_\_\_\_ Commandery No. \_\_\_\_\_

TOTAL MEMBERS END OF THIS MONTH \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

NAME OF PRESENT COMMANDER \_\_\_\_\_

NAME OF PRESENT RECORDER \_\_\_\_\_

NAME OF FORMER COMMANDER (ONLY IF A CHANGE FROM LAST REPORT) \_\_\_\_\_

NAME OF FORMER RECORDER (ONLY IF A CHANGE FROM LAST REPORT) \_\_\_\_\_

PLEASE TYPE OR PRINT NAMES, ADDRESSES AND ZIP CODES

LAST NAME	FIRST	MIDDLE
ADDRESS		
CITY		
STATE		ZIP
<input type="checkbox"/> NEW ADDRESS? (if not new address, LIST activity- <b>Knighthood, Affiliated, Reinstated, Died, Suspended, Demitted</b> -with DATE.) Place "X" in box.		<b>Birth Date:</b> <input type="text"/>
<input type="text"/> Occupation		Life Sponsor No.: <input type="text"/>
		Past Commander? <input type="text"/>
		Dual Member? (Where?) <input type="text"/>
LAST NAME		
FIRST		
MIDDLE		
ADDRESS		
CITY		
STATE		ZIP
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		Past Commander? <input type="text"/>
		Dual Member? (Where?) <input type="text"/>

INSTRUCTIONS ON REVERSE SIDE