

# APPENDIX

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**MAIL TO GRAND SECRETARY WITHIN FIVE (5) DAYS AFTER INSTALLATION**

- Secretary please note: 1. Write the First and Last Name of each officer. Include all requested information  
2. Give full name of Installing Officer and title.  
3. This certificate must be signed and Sealed by the newly elected Secretary.

**CERTIFICATE OF ELECTION, APPOINTMENT AND INSTALLATION OF OFFICERS**

To the Grand Chapter of Oregon: I hereby certify that \_\_\_\_\_ Chapter No. \_\_\_\_\_ O.E.S., did on the \_\_\_\_\_ day of May 20 \_\_\_\_\_ (first stated communication in May), duly elect these officers to serve for the ensuing year:

Worthy Matron \_\_\_\_\_

Worthy Patron \_\_\_\_\_

Associate Matron \_\_\_\_\_

Associate Patron \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

Conductress \_\_\_\_\_

Associate Conductress \_\_\_\_\_

That the following officers were duly appointed and installed to serve for the ensuing year:

Chaplain \_\_\_\_\_

Marshal \_\_\_\_\_

Organist \_\_\_\_\_

Adah \_\_\_\_\_

Chapter Seal

Ruth \_\_\_\_\_

Esther \_\_\_\_\_

Martha \_\_\_\_\_

Electa \_\_\_\_\_

Warder \_\_\_\_\_

Sentinel \_\_\_\_\_

And on the \_\_\_\_\_ of \_\_\_\_\_ 20 \_\_\_\_\_, these officers were duly installed by:

Installing Matron \_\_\_\_\_ Given under my hand and the Seal of the Chapter on the day  
Written above.

(\* To be installed at a later date) \_\_\_\_\_ Chapter Secretary



## DIRECTORY INFORMATION

Please Make  
Corrections to  
Heading →

Complete & return immediately to the Grand Secretary after your ELECTION in May, and before June 1<sup>st</sup>. Check with the incoming Worthy Matron for Friendship and Receptions. Please TYPE or PRINT.

WM \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

WP \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

AM \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

AP \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SEC \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

TRES \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

C \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

AC \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

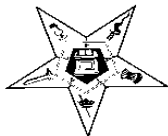
Chapter Contact for EMAIL (Required) \_\_\_\_\_

Grand Officer Reception: Name/Title/Date/Location \_\_\_\_\_

Honor Night Date: \_\_\_\_\_ Installation Date & Time/Location: \_\_\_\_\_

Friendship Night Date: \_\_\_\_\_





**CHAPTER #** \_\_\_\_\_

# Order of the Eastern Star, Oregon

### Statement

Dues for year 20 ..... \$

Unpaid dues in arrears..... \$

Total..... \$

TO: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please return statement with remittance  
Please make check payable to \_\_\_\_\_ Chapter, OES

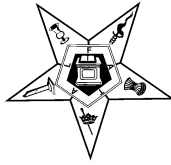
By order of the Worthy Matron

Sec. 221 (3) Dues for each calendar year are due and payable in advance of the first meeting in January.

(4) Any member failing to pay dues on or before the first meeting in February of the same year shall not be in good standing and shall be debarred from attending any Chapter in the Grand Jurisdiction other than their own until dues are paid or remitted. Any member failing to pay same on or before December 31 of the same year is hereby declared suspended from all rights and privileges of membership until the delinquency is paid or remitted.

## NOTICE OF ANNUAL ELECTION

Sec 205(1) Every Chapter shall choose by separate ballot for a term of one year at the first stated meeting in each May, the following elective officers: Worthy Matron, Worthy Patron, Associate Matron, Associate Patron, Secretary, Treasurer, Conductress, Associate Conductress.



\_\_\_\_\_ CHAPTER  
No. \_\_\_\_\_ O.E.S  
\_\_\_\_\_, 20 \_\_\_\_\_

You are hereby notified that on the 31<sup>st</sup> day of December,  
20\_\_\_\_you were suspended for non-payment of dues.

Amount of dues for which you were suspended \$ \_\_\_\_\_

In Witness Whereof, I have hereunto set my hand and  
affixed the seal of said Chapter, this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_\_.

(Chapter Seal)

\_\_\_\_\_

Chapter Secretary





\_\_\_\_\_ CHAPTER  
No. \_\_\_\_\_ O.E.S  
\_\_\_\_\_, 20 \_\_\_\_\_

You are hereby notified that on the 31<sup>st</sup> day of December,  
20\_\_\_\_you were suspended for non-payment of dues.

Amount of dues for which you were suspended \$ \_\_\_\_\_

In Witness Whereof, I have hereunto set my hand and  
affixed the seal of said Chapter, this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_\_.

(Chapter Seal)

\_\_\_\_\_  
Chapter Secretary

Chapter No. \_\_\_\_\_

## **Order of the Eastern Star**

Requests the following information:

### **CERTIFICATE OF GOOD STANDING**

FOR THE PURPOSE OF

### **PETITIONING AN EASTERN STAR CHAPTER**

Brother \_\_\_\_\_ is a Master Mason, and a member, in  
good standing, of \_\_\_\_\_ Lodge No. \_\_\_\_\_.

**OR**

Brother \_\_\_\_\_ was a Master Mason , and a member in  
good standing, of \_\_\_\_\_ Lodge No. \_\_\_\_\_ at the time of  
his death on \_\_\_\_\_.

This is to Certify, that \_\_\_\_\_ Lodge  
No. \_\_\_\_\_ is a legally constituted Lodge, working under the jurisdiction of the  
Grand Lodge of \_\_\_\_\_, A.F. & A.M. or F. & A.M.

Given under my hand and seal of the Grand Lodge or Lodge this date: \_\_\_\_\_

\_\_\_\_\_  
Grand Lodge Secretary or Lodge Secretary

(Seal of the Grand Lodge or Lodge)

**CERTIFICATE OF GOOD STANDING**  
FOR THE PURPOSE OF  
**PETITIONING AN EASTERN STAR CHAPTER**

Sister \_\_\_\_\_ is a member in good standing of  
\_\_\_\_\_ Chapter No. \_\_\_\_\_.

This is to Certify, that \_\_\_\_\_ Chapter  
No. \_\_\_\_\_ is a legally constituted Chapter, working under the jurisdiction of the  
Grand Chapter of Oregon.

Given under my hand and seal of \_\_\_\_\_ Chapter No. \_\_\_\_\_.

Date: \_\_\_\_\_  
\_\_\_\_\_ Chapter Secretary

(Seal of the Chapter)



## **PETITION FOR DEGREES**

Date \_\_\_\_\_

To the Worthy Matron, Officers and Members of \_\_\_\_\_ Chapter No \_\_\_\_\_ O.E.S. of Oregon,  
I \_\_\_\_\_, respectfully petition to receive the degrees of the  
(Type or print Full Name)

Order of the Eastern Star, and to become a member of your Chapter. If accepted, I pledge myself to a careful obedience to the laws of the Order.

**Masonic relationship:** I am the \_\_\_\_\_ of \_\_\_\_\_  
(Relationship) (Name of Master Mason)

of \_\_\_\_\_ Located at \_\_\_\_\_  
(Lodge Name and Number) (Lodge Address, at least, City and State )

**Or,** I am a member of the above named Masonic Lodge \_\_\_\_\_

**Or,** I was a member for 3 years or am a majority member of \_\_\_\_\_  
(Job's Daughters Bethel or Rainbow Assembly)

Located at \_\_\_\_\_ .  
(City and State)

**I believe in the existence of a Supreme Being:** Yes \_\_\_\_\_ No \_\_\_\_\_

My address is: \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

How long have you lived in this state? \_\_\_\_\_

If less than 6 months; give immediate previous address: \_\_\_\_\_

Have you ever petitioned any Chapter? \_\_\_\_\_ If yes, please complete the following:

About \_\_\_\_\_ I petitioned \_\_\_\_\_ at \_\_\_\_\_ .  
(Month and Year) (Chapter Name and No.) (City and State)

My petition was \_\_\_\_\_  
(Accepted, Rejected, or Other)

**Signature of Petitioner** \_\_\_\_\_

**Recommended by:** (Must be members of petitioned Chapter)

1) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for membership in the Order.

(her or Him)

2) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for membership in the Order.

(her or him)

**An Initiation fee of \$\_\_\_\_\_ must accompany this petition; also satisfactory evidence of Masonic relationship or Masonic Standing. Initiation fee includes \$5 for the International Headquarters Fund for the Eastern Star, but does NOT cover the first year's dues, which are payable at time of initiation. Balance due at initiation will be \$\_\_\_\_\_ .**

**PETITION STATUS**     > > *For Chapter Secretary Use only*

Petitioner's Name: \_\_\_\_\_

Date Petition Received \_\_\_\_\_

Petition for; Degrees \_\_\_\_\_ , Affiliation \_\_\_\_\_ , Plural \_\_\_\_\_ , Reinstatement \_\_\_\_\_

If Plural from out of State, does home jurisdiction allow Plural Membership? \_\_\_\_\_

Investigating Committee: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Date Elected/Rejected: \_\_\_\_\_

Notice of Election sent to candidate: \_\_\_\_\_

Date of Initiation: \_\_\_\_\_

(as applicable)

Signed Bylaws: \_\_\_\_\_

(as applicable)

New Member Report and IHF Fee sent to Grand Secretary: \_\_\_\_\_

Ledger Sheet prepared & filed: \_\_\_\_\_

Entered into data base: \_\_\_\_\_

(as applicable)



## **PETITION FOR AFFILIATION**

Date \_\_\_\_\_

To the Worthy Matron, Officers and Members of \_\_\_\_\_ Chapter No \_\_\_\_\_ O.E.S. of Oregon,

I \_\_\_\_\_, respectfully petition for membership in your Chapter.  
(Type or print Full Name)

If accepted I pledge myself to a careful obedience to the laws of the Order and the Bylaws of the Chapter.

My address is: \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

I was originally Initiated in \_\_\_\_\_ Located at \_\_\_\_\_  
(Chapter Name and No.) (City and State)

I have demitted from: \_\_\_\_\_ Located at \_\_\_\_\_  
(Chapter Name and No.) (City and State)

Date Demit Issued: \_\_\_\_\_

If Demit is over one-year-old the petitioner must present a Special Visiting Permit granted by the Worthy Grand Matron of Oregon:

Date of Permit: \_\_\_\_\_

(Good for 3 months)

Masons must also provide evidence of Masonic Good Standing.

**Signature of Petitioner** \_\_\_\_\_

**Recommended By:** (Must be members of petitioned Chapter)

1) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for membership in this Chapter.  
(her or him)

2) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for membership in this Chapter.  
(her or him)

**Sec 220 (2)** A fee of thirteen dollars (**\$13.00**) must accompany all petitions for Affiliation and petitions for Plural membership, which fee shall be retained by the Chapter.

**Sec. 231 (2)** ...all new members of an Oregon Chapter will pay five dollars (**\$5**) into the International Headquarters Fund as soon as they become members of the Chapter. This includes new initiates, plural memberships and affiliations.

**PETITION STATUS**     > > *For Chapter Secretary Use only*

Petitioner's Name: \_\_\_\_\_

Date Petition Received \_\_\_\_\_

Petition for; Degrees \_\_\_\_\_ , Affiliation \_\_\_\_\_ , Plural \_\_\_\_\_ , Reinstatement \_\_\_\_\_

If Plural from out of State, does home jurisdiction allow Plural Membership? \_\_\_\_\_

Investigating Committee: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Date Elected/Rejected: \_\_\_\_\_

Notice of Election sent to candidate: \_\_\_\_\_

Date of Initiation: \_\_\_\_\_

(as applicable)

Signed Bylaws: \_\_\_\_\_

(as applicable)

New Member Report and IHF Fee sent to Grand Secretary: \_\_\_\_\_

Ledger Sheet prepared & filed: \_\_\_\_\_

Entered into data base: \_\_\_\_\_

(as applicable)



## **PETITION FOR PLURAL MEMBERSHIP**

Date \_\_\_\_\_

To the Worthy Matron, Officers and Members of \_\_\_\_\_ Chapter No \_\_\_\_\_ O.E.S. of Oregon,

I \_\_\_\_\_,  
(Type or print Full Name), respectfully petition for membership in your Chapter.

If accepted I pledge myself to a careful obedience to the laws of the Order and the Bylaws of the Chapter.

I am in good standing in my other Chapter(s).

My address is: \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

I was originally Initiated in \_\_\_\_\_ Located at \_\_\_\_\_  
(Chapter Name and No.) (City and State)

Chapter(s) in which I hold now membership:

\_\_\_\_\_ Located at \_\_\_\_\_  
(Chapter Name and No.) (City and State)

\_\_\_\_\_ Located at \_\_\_\_\_  
(Chapter Name and No.) (City and State)

\_\_\_\_\_ Located at \_\_\_\_\_  
(Chapter Name and No.) (City and State)

\_\_\_\_\_ Located at \_\_\_\_\_  
(Chapter Name and No.) (City and State)

**Signature of Petitioner** \_\_\_\_\_

**Attach a copy of Current OES Dues Card, and for Masons, evidence of Masonic Good Standing.**

**Recommended by:** (Must be members of petitioned Chapter)

1) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for membership in this  
Chapter. (her or him)

2) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for membership in this  
Chapter. (her or him)

**Sec 220 (2)** A fee of thirteen dollars (**\$13.00**) must accompany all petitions for Affiliation and petitions for Plural membership, which fee shall be retained by the Chapter.

**Sec. 231 (2)** ...all new members of an Oregon Chapter will pay five dollars (**\$5**) into the International Headquarters Fund as soon as they become members of the Chapter. This includes new initiates, plural memberships and affiliations.

**PETITION STATUS**      > > *For Chapter Secretary Use only*

Petitioner's Name: \_\_\_\_\_

Date Petition Received \_\_\_\_\_

Petition for; Degrees \_\_\_\_\_ , Affiliation \_\_\_\_\_ , Plural \_\_\_\_\_ , Reinstatement \_\_\_\_\_

If Plural from out of State, does home jurisdiction allow Plural Membership? \_\_\_\_\_

Investigating Committee: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Date Elected/Rejected: \_\_\_\_\_

Notice of Election sent to candidate: \_\_\_\_\_

Date of Initiation: \_\_\_\_\_

(as applicable)

Signed Bylaws: \_\_\_\_\_

(as applicable)

New Member Report and IHF Fee sent to Grand Secretary: \_\_\_\_\_

Ledger Sheet prepared & filed: \_\_\_\_\_

Entered into data base: \_\_\_\_\_

(as applicable)



## **PETITION FOR REINSTATEMENT**

Date \_\_\_\_\_

To the Worthy Matron, Officers and Members of \_\_\_\_\_ Chapter No \_\_\_\_\_ O.E.S. of Oregon,

I \_\_\_\_\_, respectfully petition for reinstatement in your Chapter.  
(Type or print Full Name)

I was suspended on date \_\_\_\_\_.

If accepted I pledge myself to a careful obedience to the laws of the Order and the Bylaws of the Chapter.

My address is: \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_

I was originally Initiated in \_\_\_\_\_ Located in \_\_\_\_\_  
(Chapter Name and No.) (City and State)

### **Signature of Petitioner**

**Recommended By:** (Must be members of petitioned Chapter)

1) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for reinstatement  
in this Chapter. (her or him)

2) Name: \_\_\_\_\_ Phone \_\_\_\_\_

I have been acquainted with the petitioner for \_\_\_\_\_ and recommend \_\_\_\_\_ for reinstatement  
in this Chapter. (her or him)

**Sec 213, 214(5) and 220(3)** must be complied with before petition is received by Chapter.

**Sec 214(4)(b)** A petition for reinstatement shall not be received from a Brother unless he presents with his petition, satisfactory evidence that he is an affiliated Master Mason in good standing.

**Sec 215(1)** Petition for degrees, affiliation or reinstatement shall be immediately referred to a committee on investigation, appointed by the Worthy Matron in open Chapter.

**Sec 221 (4)(7)** A member suspended for non-payment of dues may be reinstated within two years from the date of suspension upon the payment to the Chapter of all dues charged against her or him upon the books of the Chapter at the time of suspension. If not so reinstated within two years' time, the suspended member must petition for reinstatement and, upon receiving a two-thirds vote of all members present, taken by uplifted hand, and **payment of dues for the current year and the sum of Thirteen Dollars (\$13.00)** shall be restored to full membership in the Order. No other dues shall accumulate during the period of suspension. [Section 128] (2017)

**PETITION STATUS**      > > *For Chapter Secretary Use only*

Petitioner's Name: \_\_\_\_\_

Date Petition Received \_\_\_\_\_

Petition for; Degrees \_\_\_\_\_ , Affiliation \_\_\_\_\_ , Plural \_\_\_\_\_ , Reinstatement \_\_\_\_\_

If Plural from out of State, does home jurisdiction allow Plural Membership? \_\_\_\_\_

Investigating Committee: 1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

Date Elected/Rejected: \_\_\_\_\_

Notice of Election sent to candidate: \_\_\_\_\_

Date of Initiation: \_\_\_\_\_  
(as applicable)

Signed Bylaws: \_\_\_\_\_  
(as applicable)

New Member Report and IHF Fee sent to Grand Secretary: \_\_\_\_\_

Ledger Sheet prepared & filed: \_\_\_\_\_

Entered into data base: \_\_\_\_\_  
(as applicable)



## **INVESTIGATING COMMITTEE APPOINTMENT AND REPORT**

Committee Member: \_\_\_\_\_

You are appointed as one of the committee to investigate the character and eligibility of;

\_\_\_\_\_ for membership

By Initiation \_\_\_\_, or by Affiliation \_\_\_\_, or by Plural membership \_\_\_\_, or by Reinstatement \_\_\_\_.

Your report is due to be returned to the Secretary by Date: \_\_\_\_\_.

The following information will assist you in performing this important duty:

Petitioner's Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth: \_\_\_\_\_

How long has resided in this jurisdiction: \_\_\_\_\_

**For Initiation:** Masonic Relationship: \_\_\_\_\_

Of Master Mason \_\_\_\_\_ A Member of \_\_\_\_\_  
(Name) (Lodge & Number)

Located at: \_\_\_\_\_  
(City & State)

Or 3 year or Majority member of IORG \_\_\_\_, or JDI \_\_\_\_.

### **For Affiliation or Plural Membership:**

Chapter Where Initiated: \_\_\_\_\_ Date Initiated: \_\_\_\_\_  
(Name, Number, and Location)

Current Chapter(s): \_\_\_\_\_  
(Name, Number, and Location)

\_\_\_\_\_  
(Name, Number, and Location)

\_\_\_\_\_  
(Name, Number, and Location)

\_\_\_\_\_  
(Name, Number, and Location)

**Previous Chapter If Demitted:** \_\_\_\_\_  
(Name, Number, and Location)

Date Demit Issued: \_\_\_\_\_ Date Visiting Permit Issued: \_\_\_\_\_

**Has ever petitioned another Chapter:** No \_\_\_\_ Yes \_\_\_\_

If Yes, Name, Number & Location of Chapter: \_\_\_\_\_

Result of Petition: \_\_\_\_\_

**If Applying for Reinstatement;** Date of Suspension: \_\_\_\_\_

**Bylaws , Section 213; Section 215(2) reads in part: "The Committee shall diligently inquire into the moral and mental qualifications of the applicant."**

The Petitioner is recommended by: 1) \_\_\_\_\_ Phone \_\_\_\_\_

2) \_\_\_\_\_ Phone \_\_\_\_\_

**The following information must be obtained by the committee member:**

1. How long have the "Recommending Members" known petitioner? 1) \_\_\_\_\_ 2) \_\_\_\_\_
2. Is the petitioner one with whom you would willing associate? \_\_\_\_\_
3. Is the petitioner respected as having good morals and character, and is law-abiding? \_\_\_\_\_

**Report:** I believe the petitioner is \_\_\_\_\_ qualified for membership \_\_\_\_\_reinstatement \_\_\_\_\_

and recommend \_\_\_\_\_ (she or he) be given the privilege of the ballot

Investigating Committee Member: \_\_\_\_\_  
(Print and Sign Name)



----- Chapter No. \_\_\_\_\_  
Order of the Eastern Star

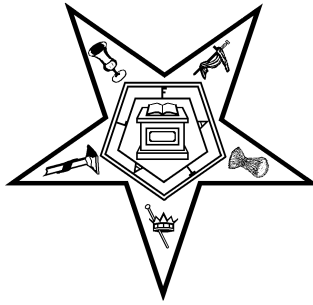
\_\_\_\_\_. 20\_\_\_\_\_

Dear

I have the pleasure to inform you that you have been elected to  
membership in this Chapter.

Please present yourself at the Chapter rooms at our next regular  
meeting on \_\_\_\_\_ at \_\_\_\_\_ o'clock  
for initiation.

-----  
Secretary



----- Chapter No. \_\_\_\_\_  
Order of the Eastern Star

\_\_\_\_\_. 20\_\_\_\_\_

Dear

I have the pleasure to inform you of your election to membership  
by affiliation in this Chapter.

Please present yourself at the Chapter rooms at our next regular  
meeting on \_\_\_\_\_ at \_\_\_\_\_ o'clock  
to sign the Bylaws of this Chapter.

-----  
Secretary

RESOLUTION TO CONSOLIDATE: [Section 226]

RESOLUTION PROPOSING THE CONSOLIDATION OF

\_\_\_\_\_ CHAPTER NO. \_\_\_\_\_

ORDER OF THE EASTERN STAR

AND \_\_\_\_\_ CHAPTER NO. \_\_\_\_\_

ORDER OF THE EASTERN STAR.

WHEREAS \_\_\_\_\_ CHAPTER NO. \_\_\_\_\_ AND \_\_\_\_\_

CHAPTER NO. \_\_\_\_\_, INDICATE A DESIRE TO FURTHER THE WORK OF THE ORDER OF THE EASTERN STAR BY CONSOLIDATION OF THEIR RESPECTIVE CHAPTERS;

AND

WHEREAS EACH CHAPTER HAS COMPLIED WITH THE REQUIREMENTS OF SECTION 226 CONSOLIDATION OF CHAPTERS, OF THE CONSTITUTION AND BYLAWS OF THE GRAND CHAPTER OF OREGON OF THE ORDER OF THE EASTERN STAR;

AND

WHEREAS, THIS RESOLUTION HAS BEEN PROPERLY READ AND APPROVED,

Then

BE IT RESOLVED THAT THE **PROPOSING CHAPTER** \_\_\_\_\_ CHAPTER

NO. \_\_\_\_\_ AND THE **RECEIVING CHAPTER** \_\_\_\_\_ NO. \_\_\_\_\_ ORDER

OF THE EASTERN STAR OF OREGON SHALL BE CONSOLIDATED AND KNOWN BY THE NAME

OF THE **RECEIVING CHAPTER** \_\_\_\_\_ NO. \_\_\_\_\_ ORDER OF THE EASTERN

STAR OF OREGON. (2009)

*As stated in Section 226 para 4*

\_\_\_\_\_  
Date of 1<sup>st</sup> Reading

\_\_\_\_\_  
Date of 2<sup>nd</sup> Reading

\_\_\_\_\_  
Approved or Rejected  
(2/3rds vote required to adopt)

\_\_\_\_\_  
WORTHY MATRON

SEAL OF CHAPTER

\_\_\_\_\_  
SECRETARY

# Consolidation Finalization Report:

\_\_\_\_\_#\_\_\_\_\_

This report must be completed and signed by the Worthy Grand Matron and assisting Past Grand before the Consolidation is considered finalized.

Grand Secretary check and initial each section:

\_\_\_\_\_1. Letter requesting proposed consolidation received from proposing chapter. Resolution to Consolidate Form sent to proposing Chapter and receiving chapter as directed by Worthy Grand Matron

\_\_\_\_\_2. Resolution to Consolidate form received in proper form from proposing chapter.

\_\_\_\_\_3. Resolution to Consolidate form received in proper form from receiving chapter.

\_\_\_\_\_4. Updated Membership Roster received from proposing chapter. Copy sent to receiving chapter.

\_\_\_\_\_5. Final Consolidation Report (Annual Report form) received from proposing chapter.

\_\_\_\_\_6. Extra copies of the Secret Work returned.

\_\_\_\_\_7. Life Memberships transferred to receiving chapter.

\_\_\_\_\_8. Proposing chapter is clear on the books of the Grand Chapter.

\_\_\_\_\_9. Consolidation Finalization Report form received, dated, and filed.

=====

All forms have been reviewed.

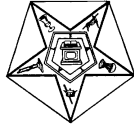
Secretary and Treasurer's Books, furniture and paraphernalia have been given to receiving chapter.

All monies and accounts have been transferred to receiving chapter.

Signature of Assisting Past Grand \_\_\_\_\_ Date \_\_\_\_\_

Signature of Worthy Grand Matron \_\_\_\_\_ Date \_\_\_\_\_

## TO ALL MEMBERS OF THE ORDER OF THE EASTERN STAR



***This Demit Witnesseth:***

**That** \_\_\_\_\_

**Whose signature appears in the margin of this instrument, was received into**

\_\_\_\_\_ **Chapter No. \_\_\_\_\_ of \_\_\_\_\_,**  
**Oregon, on \_\_\_\_\_, by \_\_\_\_\_ and that having paid all dues,**  
**and being free from all charges, \_\_\_\_\_ is at \_\_\_\_\_ own request lawfully dismissed from**  
**membership therein. This demit is valid indefinitely for the purpose of affiliation with visiting**  
**privileges unrestricted for one year from date of issue.**

SEAL

**Given under my hand and the seal of said**  
**Chapter This \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.**

\_\_\_\_\_  
**Secretary**

Membership record of \_\_\_\_\_

In \_\_\_\_\_ Chapter No. \_\_\_\_\_ is as follows:

Initiated: \_\_\_\_\_

Suspended: \_\_\_\_\_ Reinstated: \_\_\_\_\_

Demitted: \_\_\_\_\_

Affiliated: \_\_\_\_\_

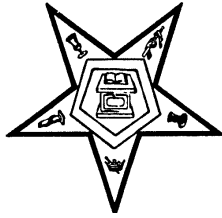
Name Changes: \_\_\_\_\_ from \_\_\_\_\_

Birth date: \_\_\_\_\_

(Seal)

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
\_\_\_\_\_  
Chapter No. \_



## NOTIFICATION OF MEMBER RELOCATION

Office of the Secretary of

\_\_\_\_\_ Chapter No \_\_\_\_\_ of Oregon

Date: \_\_\_\_\_

To \_\_\_\_\_ Chapter No. \_\_\_\_\_

\_\_\_\_\_  
Secretary's Name\_\_\_\_\_  
Address  
\_\_\_\_\_

Our member, \_\_\_\_\_ has moved into your area.

Would you or a member designated by you, welcome our member and invite her/him  
to attend your Chapter?

Our member's name and address is

\_\_\_\_\_  
\_\_\_\_\_

It is our hope that by contacting our members who have moved away and by making them feel  
welcome by the Chapter in the city where they have moved, they will continue to enjoy the  
benefits of our beautiful order.

Thank you for your cooperation and assistance.

\_\_\_\_\_  
Secretary

## APPLICATION FOR LIFE MEMBERSHIP

LM# \_\_\_\_\_



Date: \_\_\_\_\_

From: \_\_\_\_\_ Chapter No. \_\_\_\_\_

\_\_\_\_\_  
(City)

Enclosed find a check in the amount of \$\_\_\_\_\_ (including **\$2.50** for handling charges) in payment of a Life Membership in this Chapter for:

Sister \_\_\_\_\_

Brother \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Unless instructed otherwise, the Life Certificate is mailed to the Chapter Secretary.

(Chapter Seal)

\_\_\_\_\_  
Chapter Secretary\_\_\_\_\_  
Certificate Card Ledger Yellow Card C

(This Section for Grand Chapter Office Use)

Date Request Received\_

\_\_\_\_\_

Life Membership Number\_

\_\_\_\_\_

Date of Original Purchase \_\_\_\_\_ Amount of  
Original Purchase \_\_\_\_\_



## LIFE MEMBERSHIP TRANSFER FORM

This Form is to be filled out by the receiving chapter and must be accompanied by the **\$2 transfer fee**. After processing, the form will be completed by the Grand Secretary. Copies of the completed transfer form will be sent to the Life Member, the receiving chapter, and the chapter from which it was transferred.

Date of Request \_\_\_\_\_

Name of Life Member authorizing the transfer \_\_\_\_\_

Chapter now holding the Life Membership \_\_\_\_\_ No. \_\_\_\_\_

Chapter to receive Life Membership \_\_\_\_\_ No. \_\_\_\_\_

Chapter Seal

\_\_\_\_\_  
Receiving Chapter Secretary Signature

.....  
(This Section for Grand Chapter Office Use)

Date Request Received \_\_\_\_\_

Life Membership Number \_\_\_\_\_

Date of Original Purchase \_\_\_\_\_

Cost of Original Purchase \_\_\_\_\_

Date of completed transfer \_\_\_\_\_

Grand Chapter Seal

\_\_\_\_\_  
Grand Secretary Signature

Ledger(sending) \_\_\_\_\_ Ledger(receiving) \_\_\_\_\_ Yellow Card \_\_\_\_\_ Computer \_\_\_\_\_



## APPLICATION FOR ADDITION TO LIFE MEMBERSHIP



DATE: \_\_\_\_\_

FROM: \_\_\_\_\_ CHAPTER NO, \_\_\_\_\_  
\_\_\_\_\_, OREGON

Enclosed is a check in the amount of \$\_\_\_\_\_ to be deposited into the Life Membership Fund:  
(increments of \$25)

**OF:**

Sister or Brother \_\_\_\_\_

**OR:**

\_Chapter's Life Membership Equity

*No certificate will be issued. No handling charges.*

\_\_\_\_\_  
Chapter Secretary

# APPLICATION FOR MEMORIAL LIFE MEMBERSHIP



DATE: \_\_\_\_\_

FROM: \_\_\_\_\_ CHAPTER NO, \_\_\_\_\_  
\_\_\_\_\_, OREGON

Enclosed is a check in the amount of \$\_\_\_\_\_ in payment of an Honorary Life Membership in Memory of:

Sister or Brother \_\_\_\_\_

*No certificate will be issued. No handling charges.*

(Chapter Seal)

\_\_\_\_\_

Chapter Secretary

## CHAPTER SECRETARY RECEIPT FOR SECRET WORK

Chapter \_\_\_\_\_ Year \_\_\_\_\_

The officers whose signatures appear below are in charge their Secret Work as listed for the ensuing year. They are responsible for return of this Secret Work at the next installation of this Chapter's Officers, or be subject to a fine stated in the Bylaws, Section 211(6), 212(2).

Delivered to Worthy Patron \_\_\_\_\_ Date: \_\_\_\_\_

Received from Worthy Patron \_\_\_\_\_ Date: \_\_\_\_\_

1 Secret Work

.....

Delivered to Associate Patron \_\_\_\_\_ Date: \_\_\_\_\_

Received from Associate Patron \_\_\_\_\_ Date: \_\_\_\_\_

1 Secret Work

.....

Delivered to Conductress \_\_\_\_\_ Date: \_\_\_\_\_

Received from Conductress \_\_\_\_\_ Date: \_\_\_\_\_

1 Secret Work

.....

Delivered to Associate Conductress \_\_\_\_\_ Date: \_\_\_\_\_

Received from Associate Conductress \_\_\_\_\_ Date: \_\_\_\_\_

1 Secret Work

.....

\_\_\_\_\_  
Secretary

**FOR CHAPTER FILES – DO NOT SEND TO GRAND SECRETARY**

## REQUEST FOR SPECIAL DISPENSATION

Date of Request \_\_\_\_\_

Chapter Name and Number \_\_\_\_\_

### REASON FOR REQUEST (explain completely, include proposed dates)

☐ 1. To complete an election of officers following the regular May election, but before the regular installation. Which Officers? \_\_\_\_\_

\_\_\_\_\_

☐ 2. Election of any of the top four officers at any time other than the first Stated communication in May. Which Officers? \_\_\_\_\_

\_\_\_\_\_

☐ 3. Installation "out of time" of any of the top four officers (other than between Grand Chapter and July 31<sup>ST</sup>). Which Officers? \_\_\_\_\_

\_\_\_\_\_

☐ 4. Move chapter charter for only one meeting. Explain \_\_\_\_\_

\_\_\_\_\_

☐ 5. Move chapter charter for an emergency permanent change of meeting place. Explain: \_\_\_\_\_

\_\_\_\_\_

☐ 6. Hold Make-Up Meeting. Explain conditions "beyond reasonable control"

\_\_\_\_\_  
\_\_\_\_\_

Date of Chapter Vote: \_\_\_\_\_ Emergency Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Worthy Matron

\_\_\_\_\_  
Signature of Chapter Secretary

[seal]

This request (except for request for "Make-up Meeting") must be made after majority vote of the chapter. In the case of an emergency, the request may come from the Worthy Matron or Worthy Patron. The request must be signed by the Worthy Matron or Worthy Patron and the Secretary. This form must be accompanied by the FEE OF \$1 and embossed with the seal of the chapter.

Send to: Worthy Grand Matron  
Grand Chapter of Oregon  
P O Box 68257  
Oak Grove, OR 97268

## FINANCE INSTRUCTIONS FOR SECRETARIES AND TREASURERS

Section 250 Article VI, #5: The Secretary shall record the proceedings of the Chapter; **collect and receive all money due the Chapter, and pay the same to the Treasurer immediately after the close of the meeting, taking her receipt therefor; keep a correct account between the Chapter and its members;**

Section 250 Article VI, #6 **The Treasurer shall receive all money from the secretary immediately after the close of the meeting, keep a just and regular account thereof,** and pay out the same by direction of the Worthy Matron and consent of the chapter.

Uniform Workbook FINANCIAL STATEMENT: This statement includes all monies received since the last meeting and to the end of the present meeting. It also includes all warrants that will be used because of bills, motions or contributions which cause payments because of this meeting. You should also write and read warrants for budgeted items, such as rent, budgeted donations, gifts, etc.

**Secretaries:** In order to be in compliance you must:

**Write and give a warrant to the treasurer for all bills.**

**Keep a financial ledger** accounting for all money taken in, given to the treasurer and all warrants written. You may choose the type of ledger you use, but it must include columns for descriptions, money received, warrants written, and totals. This may be done on a computer, but, YOU MUST PRINT OUT A COPY MONTHLY AND PLACE IT IN A THREE RING BINDER.

You must read a financial statement at each stated meeting. See Blank form of minutes at the end of the white pages. You must include all accounts, not just the checking account.

You must have all of the accounts numbers at the bottom of each set of minutes. (You do not read them)

**Treasurers:** In order to be in compliance you must:

**Write a receipt and give it to the secretary for all money given to you.**

**Only write a check if a warrant has been issued.**

**Keep a financial ledger** accounting for all money and warrants received, checks written and paid out. You may choose the type of ledger you use, but it must include columns for money received, warrants, and totals. This may be done on a computer, but, YOU MUST PRINT OUT A COPY MONTHLY AND PLACE IT IN A THREE RING BINDER.

**You must give a receipt for the money given to you at each meeting.**  
**There is a place for you to sign at the bottom of the minutes attesting that the receipts listed by the Secretary in that meeting's Minutes is correct.**

## AUDITS

1. Make an itemized accounting of sources of RECEIPTS and EXPENDITURES of monies by categories (dues, ESTARL, supplies, etc. See audit sheet.
2. Look over canceled checks, check stubs, and bank statements.
3. Compare checks with WARRANTS ISSUED
4. Figure TOTAL DISBURSEMENTS:
  - a. #1 read warrants
  - b. #2 read checks MUST BE THE SAME
  - c. #3 runs the adding machine (Suggest one with a tape read out)
5. Total Secretary's receipts
6. Total Treasurer's receipts.
7. Figure TOTAL RECEIPTS
  - a. #1 read Secretary's receipts
  - b. #2 read Treasurer's receipts [MUST BE THE SAME]
  - c. #3 runs the adding machine
8. RECONCILIATION
  - a. Take total bank balance last audit
  - b. Add total receipts this year
  - c. Add result
  - d. Subtract total disbursements this year.
  - e. Result should equal balance at end of year and this audit.
9. Secure for the Savings Accounts all interest earned for the year. The Treasurer should get this from the bank. These should be added to these accounts in the final accounting.
10. Secure statements of all investments/time Certificates. These must also be included in the final accounting.
11. Sign all books and the last page of warrants issued.
12. All members of the Audit Committee must sign the Audit
13. Make two copies of written report which shall be read in detail at the first stated meeting after Installation of Officers, (this is the only way members of the Chapter are informed of how their money has been spent). Give one copy to the Secretary for the minute book, and one to the Treasurer for her records.

Entries in all accounting books or accounting sheets must be in ink.

The purpose of the audit is to make sure that the Chapter's books are in fiscal order, that the Chapter is using its assets in a manner consistent with the Order's aims and purposes, and disbursements are as directed by the Chapter Members.

Feel free to modify the attached Audit forms to fit the circumstances of your Chapter. However, the account numbers and bank names must to be indicated. Each committee member must sign the completed Audit; the Chairman should sign and date in the Treasurer's books that they were audited.

It is helpful to make sure that your budget committee has a copy of the Audit so that the proposed Budget accurately reflects the realities of the Chapter. **The Audit Report is to be presented at the first meeting in September.** [Section 250, Article VII, 2.b]

RECONCILIATION of Checking Account # \_\_\_\_\_

At \_\_\_\_\_ Bank

Balance forward \_\_\_\_\_  
Total Receipts for \_\_\_\_\_  
the year \_\_\_\_\_

Total \_\_\_\_\_

LESS Disbursements for the year \_\_\_\_\_

Balance on Hand \$ \_\_\_\_\_

RECEIPTS

— Dues \_\_\_\_\_  
— Fees \_\_\_\_\_  
— New Life Members \_\_\_\_\_  
— GC Life Member Earnings \_\_\_\_\_  
— Coin Drills \_\_\_\_\_  
— Sales – Supplies \_\_\_\_\_  
— Donations \_\_\_\_\_  
— Scholarships \_\_\_\_\_  
— Home Endowment/OutReach \_\_\_\_\_  
— Cancer Research \_\_\_\_\_  
— PAVE \_\_\_\_\_  
— Special Projects \_\_\_\_\_  
— International Temple Fund \_\_\_\_\_  
— Money Raisers \_\_\_\_\_  
— From Savings/CDs/Investments \_\_\_\_\_  
— Miscellaneous \_\_\_\_\_

DISBURSEMENTS

GC dues, MESH Tax, Ins.  
Rent – Insurance  
Life Members and fees  
Chapter & Secretary supplies  
WM Allowance, Ode Cards Jewels  
Secretary salary  
GC allowances  
ESTARL, DMD Scholarship  
Home Endowment/OutReach  
Cancer Research  
PAVE  
Special Projects  
International Temple Fund  
Youth donations  
GV, OV, Friendship/Honor Nite  
Installation Expenses  
Repair, replace furninshings  
Miscellaneous

Total Receipts \$ \_\_\_\_\_

Total Disbursements \$ \_\_\_\_\_

Reconciliation of Savings/Investment Account(s)

Account # \_\_\_\_\_ at \_\_\_\_\_ Bank

Beginning Balance \_\_\_\_\_

Interest/Dividends \_\_\_\_\_

Withdrawals \_\_\_\_\_ to \_\_\_\_\_

Ending Balance \_\_\_\_\_

Account # \_\_\_\_\_ at \_\_\_\_\_ Bank

Beginning Balance \_\_\_\_\_

Interest/Dividends \_\_\_\_\_

Withdrawals \_\_\_\_\_ to \_\_\_\_\_

Ending Balance \_\_\_\_\_

AUDIT of \_\_\_\_\_ # \_\_\_\_\_ 20 \_\_\_\_\_ 20 \_\_\_\_\_

CD # \_\_\_\_\_ Amount: \_\_\_\_\_ Interest \_\_\_\_\_ End Amount \_\_\_\_\_

Bank \_\_\_\_\_

CD # \_\_\_\_\_ Amount: \_\_\_\_\_ Interest \_\_\_\_\_ End Amount \_\_\_\_\_

Bank \_\_\_\_\_

CD # \_\_\_\_\_ Amount: \_\_\_\_\_ Interest \_\_\_\_\_ End Amount \_\_\_\_\_

Bank \_\_\_\_\_

Total Reconciliation:

Beginning balance of Financial Assets: \_\_\_\_\_

Receipts of the Year \_\_\_\_\_

Less Distributions \_\_\_\_\_

Balance on Hand:            Checking accounts    \_\_\_\_\_

Balance on Hand            Savings accounts    \_\_\_\_\_

Balance on Hand            Investments/CDs    \_\_\_\_\_

**Total Financial Assets of \_\_\_\_\_ Chapter # \_\_\_\_\_**

**Secretary's Books \_\_\_\_\_ agree \_\_\_\_\_ do not agree with Treasurer. Explanation if disagree**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Audit: \_\_\_\_\_

Audit Committee \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**20      WORKSHEET**

**AFFILIATED & PLURAL**

NAME	DEMIT DATE   Election Date	FROM CHAPTER & STATE	TO MEMBERSHIP
<b>**New Mem.Form Sent</b>			

NAME	<b><u>INITIATED</u></b> DATE ELECTED	DATE INITIATED

**INTERNATIONAL HEADQUARTERS FUND**

(Due from all new members and duals and affiliates.)

<b><u>NAME</u></b>	<b><u>COLLECTED</u></b>	<b><u>PAID TO GRAND CHAPTER</u></b>

**CHANGE OF NAME**

FIRST NAME	FORMER LAST NAME	NEW LAST NAME

**DEATHS**

NAME	DATE OF DEATH
*Altar Draped	**Grand Chapter Notified

**DEMITTED**

NAME	DATE OF DEMIT
*Grand Chapter Notified	

**SUSPENDED Non Payment of Dues**

NAME	DATE OF SUSPENSION

**DUES REMITTED**

(Must be Remitted & **CONFINED** to qualify for deduction on Annual Report.)

NAME	DATE

CHAPTER \_\_\_\_\_ # \_\_\_\_\_

**MEMBER  
CHANGES**

**Old NAME:** \_\_\_\_\_

New Name: \_\_\_\_\_

Address Change: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Date of Demit: \_\_\_\_\_ Date of Reinstatement \_\_\_\_\_

**Old NAME:** \_\_\_\_\_

New Name: \_\_\_\_\_

Address Change: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Date of Demit: \_\_\_\_\_ Date of Reinstatement \_\_\_\_\_

**Old NAME:** \_\_\_\_\_

New Name: \_\_\_\_\_

Address Change: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Date of Demit: \_\_\_\_\_ Date of Reinstatement \_\_\_\_\_

**Old NAME:** \_\_\_\_\_

New Name: \_\_\_\_\_

Address Change: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Death: \_\_\_\_\_ Date of Demit: \_\_\_\_\_ Date of Reinstatement \_\_\_\_\_

**FORMAT FOR PROPOSING AMENDMENTS TO CHANGE**  
**THE GRAND CHAPTER BYLAWS**  
**[Reference Sections 13 (4) and 251 (1)]**

Proposed Amendments To Change The BYLAWS

---

(Needs 2/3 vote to pass at the same session it is read and voted on to become law. [Section 251 (3)])

SECTION # Title or Heading from Bylaws or Uniform Work Book

Now Reads:

**Copy entire section exactly as is printed in the Bylaws including the date.**

Amend to Read:

**List entire section under consideration for change**

If no change is proposed in a particular paragraph or subdivision, indicate that:

7. No change to this paragraph or No change to this subdivision

If a change within a paragraph or subdivision deletes any existing text, the deletion will be indicated by showing the existing text with strikethrough.

2. ~~This section will be deleted~~ but the rest of the paragraph remains in force.

If a change within a paragraph or subdivision adds text to the existing text, the addition will be indicated by **bolding** and underlining the new text.

5. **This sentence will be added.**

Give Rationale: Why you want to see this change.

Submitted by: Chapter Name and Number  
AND the date it was voted on by the chapter  
chapter

Submitted by Chapter Name and Number  
AND the date it was voted on by the

---

Worthy Matron

---

Worthy Matron

---

Secretary

---

Secretary

---

Date

---

Date

{ Chapter Seal }

{ Chapter Seal }

**FORMAT FOR PROPOSING AMENDMENTS TO CHANGE THE CONSTITUTION**  
**[Section 13 (4)]**

Proposed Amendments To Change The Constitution

---

(Needs 2/3 vote to pass at the same session it is read and voted on to become law. [Section 13 (5)])

SECTION # Title or Heading from Bylaws or Uniform Work Book

Now Reads:

**Copy entire section exactly as is printed in the Constitution including the date.**

Amend to Read:

**List entire section under consideration for change**

If no change is proposed in a particular paragraph or subdivision, indicate that:

7. No change to this paragraph or No change to this subdivision

If a change within a paragraph or subdivision deletes any existing text, the deletion will be indicated by showing the existing text with strikethrough.

2. ~~This section will be deleted but~~ the rest of the paragraph remains in force.

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5. **This sentence will be added.**

Give Rationale: Why you want to see this change.

Submitted by: Chapter Name and Number  
AND the date it was voted on by the chapter

Submitted by Chapter Name and Number  
AND the date it was voted on by the chapter

\_\_\_\_\_  
Worthy Matron

\_\_\_\_\_  
Worthy Matron

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

{ Chapter Seal }

{ Chapter Seal }

























