Set No.___ of ___ KNIGHT TEMPLAR MEMBERSHIP REPORT, MONTH OF _____ 20_____

TOTAL MEMBERS ON LAST MONTH'S REPORT _____   From _____ 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   NAME OF FORMER RECORDER (only if a change from
last report)   last report)

PLEASE TYPE NAMES ADDRESS AND ZIP CODES

Last Name:	First:	Middle:
Address:		
City:	State:	Zip+4:
☐ NEW ADDRESS (If not new address, Select Activity - **Knighted** ☐, **Affiliated** ☐ Place X in Box **Reinstated** ☐, **Died** ☐, **Suspended** ☐, **Demitted** ☐		Date
		Birth Date:
		Life Sponsor NO.:
		Past Commander:
Occupation:		Dual Member ? (Where?)
Last Name:	First:	Middle:
Address:		
City:	State:	Zip+4:
☐ NEW ADDRESS (If not new address, Select Activity - **Knighted** ☐, **Affiliated** ☐ Place X in Box **Reinstated** ☐, **Died** ☐, **Suspended** ☐, **Demitted** ☐		Date
		Birth Date:
		Life Sponsor NO.:
		Past Commander:
Occupation:		Dual Member ? (Where?)
Last Name	First:	Middle:
Address:		
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☐ NEW ADDRESS (If not new address, Select Activity - **Knighted** ☐, **Affiliated** ☐ Place X in Box **Reinstated** ☐, **Died** ☐, **Suspended** ☐, **Demitted** ☐ **Date**		Date
		Birth Date:
		Life Sponsor NO.:
		Past Commander:
Occupation:		Dual Member ? (Where?)
Last Name:	First:	Middle:
Address:		
City:	State:	Zip+4:
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		Birth Date:
		Life Sponsor NO.:
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Occupation:		Dual Member ? (Where?)
Last Name	First:	Middle:
Address:		
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		Birth Date:
		Life Sponsor NO.:
		Past Commander:
Occupation:		Dual Member ? (Where?)

When complete email to: gyr@flgyr.org