



NOTICE OF TERMINATION OF DUAL MEMBERSHIP

(To be sent to the Secretary of the Primary Chapter)

_____ 20 ____

This is to advise that the written application of Sister/Brother _____ for termination of her/his DUAL MEMBERSHIP in _____ Chapter No _____ Order of the Eastern Star of Florida, was granted at the stated meeting of said Chapter held in _____, Florida, on the _____ day of _____, 20____; and that her/his name has been removed from the roll of the Chapter and that such DUAL MEMBERSHIP has been terminated.

(Chapter Seal)

Secretary Signature

Address: _____

Phone: _____