

Office Use Only:

SEC: _____
WM: _____
Seal: _____
PCT: _____
IHF: _____
DAW: _____

REPORT OF _____ **Chapter No** _____

Located at _____ **County of** _____

FOR THE CALENDAR YEAR ENDING DECEMBER 31, 2023

**THE GRAND CHAPTER OF FLORIDA, ORDER OF THE EASTERN STAR,
INC.**

INSTRUCTIONS - PLEASE TYPE REPORT IF POSSIBLE (OR PRINT USING A BLACK PEN)

Make report in duplicate, retaining one copy for Chapter records and forwarding one copy to the Grand Secretary no later than January 15, 2024. In List of Members, list only those who are members at the close of the year. In Box #1 list names in full in alphabetical order, last name first. List ALL SISTERS first, state Mrs., Miss or Ms. Then, list ALL BROTHERS, state Mr. Where applicable indicate P.M. or P.P. after each Past Matron or Past Patron of a Florida subordinate chapter. Indicate "Dual" after the name of every Dual Member. Indicate "Plural" after the name of every Plural Member.

Do not list those who died, demitted, were suspended or expelled during the year 2023 in the List of Members. The number of names under List of Members (Box #1) must correspond with ► "Present Number of Members" on page 15 of the report.

LIST OF MEMBERS

Box #1 - pages 1-4

NO.	NAME	NO.	NAME
1		19	
2		20	
3		21	
4		22	
5		23	
6		24	
7		25	
8		26	
9		27	
10		28	
11		29	
12		30	
13		31	
14		32	
15		33	
16		34	
17		35	
18		36	

LIST OF MEMBERS

NO.	NAME	NO.	NAME
37		66	
38		67	
39		68	
40		69	
41		70	
42		71	
43		72	
44		73	
45		74	
46		75	
47		76	
48		77	
49		78	
50		79	
51		80	
52		81	
53		82	
54		83	
55		84	
56		85	
57		86	
58		87	
59		88	
60		89	
61		90	
62		91	
63		92	
64		93	
65		94	

LIST OF MEMBERS

NO.	NAME	NO.	NAME
95		124	
96		125	
97		126	
98		127	
99		128	
100		129	
101		130	
102		131	
103		132	
104		133	
105		134	
106		135	
107		136	
108		137	
109		138	
110		139	
111		140	
112		141	
113		142	
114		143	
115		144	
116		145	
117		146	
118		147	
119		148	
120		149	
121		150	
122		151	
123		152	

LIST OF MEMBERS

NO.	NAME	NO.	NAME
153		182	
154		183	
155		184	
156		185	
157		186	
158		187	
159		188	
160		189	
161		190	
162		191	
163		192	
164		193	
165		194	
166		195	
167		196	
168		197	
169		198	
170		199	
171		200	
172		201	
173		202	
174		203	
175		204	
176		205	
177		206	
178		207	
179		208	
180		209	
181		210	

Box #2	LIST ALL MEMBERS OMITTED ON PREVIOUS REPORT(S)				
	Name	Date Initiated	Or Affiliated	Years Omitted	Total # of Years
1					
2					
3					
4					
5					
6					
				Total # of Years Omitted:	

Box #3	LIST ALL DUAL MEMBERS (Include New Dual Members joining this year as shown in Box 6-B)	
	Name	Primary Chapter Name, Number and Location
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		

	Box #3-A	LIST ALL PLURAL MEMBERS (Include Plural Affiliated Members joining this year shown in Box 6-C)
	Name	Primary Chapter Name, Number and Location
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

Box #4 LIST MEMBERS INITIATED THIS YEAR

	NAME	DATE		NAME	DATE
1			11		
2			12		
3			13		
4			14		
5			15		
6			16		
7			17		
8			18		
9			19		
10			20		

Box #5 LIST MEMBERS REINSTATED/RESTORED THIS YEAR

	NAME	DATE		NAME	DATE
1			4		
2			5		
3			6		

Box #6 LIST MEMBERS AFFILIATED THIS YEAR

(Do not include Dual/Plural Members becoming Primary Members)

	NAME	DATE	STATE		NAME	DATE	STATE
1				4			
2				5			
3				6			

Box #6-A LIST DUAL/PLURAL MEMBERS BECOMING PRIMARY THIS YEAR

(Information Box only. DO NOT include in Box 12 or 12-A)

	NAME	DATE		NAME	DATE
1			4		
2			5		
3			6		

Box #6-B LIST NEW DUAL MEMBERS THIS YEAR

(Include in Box 3)

	NAME	DATE		NAME	DATE
1			4		
2			5		
3			6		

Box #6-C LIST NEW PLURAL MEMBERS THIS YEAR

(Include in Box 3-A)

	NAME	DATE		NAME	DATE
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		

Box #7 LIST ALL PRIMARY MEMBERS WHO DIED DURING YEAR

(Do not list deceased Dural/Plural Members here, list them in Box 12 Dual Members Terminated or 12-A Plural Members Terminated)

	NAME	DATE		NAME	DATE
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		

Box #8 LIST ALL PRIMARY MEMBERS DEMITTING DURING THE YEAR

(Do not list Demitted Dual/Plural members here, list them in Box 12 Dual Members Terminated or 12-A Plural Members Terminated)

	NAME	DATE		NAME	DATE
1			6		
2			7		
3			8		
4			9		
5			10		

Box #9 LIST ALL PRIMARY MEMBERS SUSPENDED DURING THE YEAR

(Do not list Suspended Dual/Plural members here, list them in Box 12 Dual Members Terminated or Box 12-A Plural Members Terminated)

	NAME	DATE		NAME	DATE
1			9		
2			10		
3			11		
4			12		
5			13		
6			14		
7			15		
8			16		

Box #10 LIST ALL REJECTIONS DURING THE YEAR

	NAME	DATE		NAME	DATE
1			2		

Box #11 LIST ALL MEMBERS EXPELLED DURING THE YEAR

(Do not list Dual/Plural members here, list them in Box 12 Dual Members Terminated or Box 12-A Plural Members Terminated)

	NAME	DATE		NAME	DATE
1			2		

Box #15**LIST OF CONSOLIDATED MEMBERS**

Indicate "Dual" after the name of every Dual Member. Indicate "Plural" after the name of every Plural Member.

Attach extra pages as necessary. A copy of the Consolidated Chapters final report is acceptable to attach.

If the Consolidated Chapter paid per capita tax with their final report, these members are subtracted on page 15.

These members are also listed in Box 1.

	NAME		NAME
1		29	
2		30	
3		31	
4		32	
5		33	
6		34	
7		35	
8		36	
9		37	
10		38	
11		39	
12		40	
13		41	
14		42	
15		43	
16		44	
17		45	
18		46	
19		47	
20		48	
21		49	
22		50	
23		51	
24		52	
25		53	
26		54	
27		55	
28		56	

SUMMARY

1.	Number of members at last report, as stated on instructions		
2.	Number Omitted (Box #2, pg. 5)	+	
3.	Number Initiated during the year (Box #4, pg. 7)	+	
4.	Number Reinstated/Restored during the year (Box #5, pg. 7)	+	
5.	Number Affiliated during the year (Box #6, pg. 7)	+	
6.	Number Dual Members during the year (Box #6-B, pg. 7)	+	
7.	Number Plural Members during the year (Box #6-C, pg. 7)	+	
8.	Whole number during the year	=	

The starting number should be the number of members at the end of your report from the previous year. For your convenience, we have listed what this number should be on your included instructions.

The Whole Number (Line 8) must be carried forward to one place on page 15 and one place on page 16.

PERPETUAL MEMBERSHIP

	LIST OF NEW PERPETUAL MEMBERS CERTIFIED DURING YEAR REGULAR, MEMORIAL OR HONORARY		
	Box #16	Include in Boxes 21-25 as appropriate	
	Name	Type, Regular, Memorial or Honorary	Date Became a Perpetual Member
1			
2			
3			
4			
5			
6			
	LIST ALL PERPETUAL MEMBERS AFFILIATING FROM OTHER FLORIDA CHAPTERS DURING THE YEAR		
	Box #17	Include in Boxes 21-25 as appropriate	
	Name	Type	Prior Florida Chapter Name and Number
1			
2			
3			

Box #18 LIST REGULAR PERPETUAL MEMBERS WHO DEMITTED AND AFFILIATED WITH ANOTHER FLORIDA CHAPTER	
	Name New Florida Chapter Name and Number
1	
2	
Box #19 LIST REGULAR PERPETUAL MEMBERS WHO DIED DURING THE YEAR Include in Box #22 This is an informational box only	
	Name Date of Death
1	
2	
3	
Box #20 LIST ANY CHANGE IN REGULAR PERPETUAL MEMBER'S STATUS DURING THE YEAR NOT COVERED ABOVE	
	Name Change in Status
1	
2	
3	
4	

PERPETUAL MEMBERSHIP

Box #21 LIST ALL LIVING REGULAR PERPETUAL MEMBERS AT END OF YEAR	
	Name
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	

Regular Perpetual Members, Continued	
14	
15	
16	
17	
18	
19	
20	
Box#22	LIST ALL DECEASED REGULAR PERPETUAL MEMBERS AT END OF YEAR
	Name
1	
2	
3	
4	
5	
6	
7	
Box #23	LIST ALL MEMORIAL PERPETUAL MEMBERS AT END OF YEAR
	Name
1	
2	
3	
4	
Box #24	LIST OF ALL HONORARY PERPETUAL MEMBERS AT END OF YEAR (Include deceased Honorary Perpetual Members)
	Name
1	
2	
3	
4	
5	

Box #25		LIST DEMITTED PERPETUAL MEMBERS WHO HAVE NOT AFFILIATED WITH ANOTHER FLORIDA CHAPTER	
	Name		
1			
2			
3			

PERPETUAL MEMBERSHIP SUMMARY

1.	Number of all Perpetual Members at the beginning of the year (from last year's report) (Regular, Honorary, and Memorial – Alive and Deceased)		
2.	Number new Perpetual Members during the year (Box #16, pg. 12)	+	
3.	Number Perpetual Members Affiliating from other Florida Chapters (Box #17, pg. 12) (Regular, Honorary, and Memorial – Alive and Deceased)	+	
4.	Number Regular Perpetual Members Demitted and Affiliated with another FL Chapter (Box #18, pg. 12)	-	
5.	Number Other Changes in Regular Perpetual Members' status (Box #20, pg. 12)	±	
6.	Total lines 1 through 5	=	
7.	Number all Living Regular Perpetual Members at end of year (Box #21, pg. 13)	+	
8.	Number all Deceased Regular Perpetual Members at end of year (Box #22, pg. 13)	+	
9.	Number all Memorial Perpetual Members at end of year (Box #23, pg. 13)	+	
10.	Number all Honorary Perpetual Members at end of year (Box #24, pg. 14)	+	
11.	Number Demitted Regular Perpetual Members not Affiliated with a Florida Chapter (Box #25, pg. 14)	+	
12.	Total number of all Perpetual Members at end of year (total lines 7 thru 11)	=	

Note: The number on line 6 and the number on line 12 should be the same. This number should be the same as the number of all Perpetual Members listed on the Certified List of Perpetual Members furnished annually to your Chapter by the Grand Secretary.

ESTIMATE OF PER CAPITA TAX DUE TO GRAND CHAPTER

(The Grand Chapter charges the chapters \$6.50 per member who is or was a member of the chapter for the whole or any part of the calendar year even for one moment.)

Whole number of members as stated on Line 8 of page 11	_____	x \$6.50	\$	_____
Number of Total Years Omitted (Box #2, pg. 5)	_____	x \$6.50	+	\$ _____
Total			=	\$ _____

DEDUCT

NOTE: Only one deduction per member permitted in this Section (See instruction sheets, Page 8 “DEDUCT”)

Number affiliated having previous membership in another Florida Chapter during the year (Box #14, pg. 9 and/or Box #15, pg. 10)	_____			
Number Perpetual Members living at end of year (Box #21, pg. 13)	_____	+		
Number All Deceased Regular Perpetual Members at end of year (Box #22, pg. 13)	_____	+		
Total number deducted	_____	=	x \$6.50	-\$ _____
Amount payable to Grand Chapter by January 15, 2024				=\$ _____

ESTIMATE AMOUNT DUE FOR INTERNATIONAL HEADQUARTERS FUND

Each member shall pay \$5.00 to the International Headquarters Fund upon joining a chapter, whether by Initiation, Affiliation, Dual or Plural Membership; Members of a consolidating chapter do NOT pay this fee on consolidation.

Information from Page 7

Box 4	Members Initiated in 2023	+	_____
Box 6	Members Affiliating in 2023	+	_____
Box 6-B	Dual Members joining in 2023	+	_____
Box 6-C	Plural Members joining in 2023	+	_____
		=	_____
			X \$5.00
Amount payable to Grand Chapter by January 15, 2024		=	_____

**ESTIMATE OF AMOUNT DUE TO GRAND CHAPTER FOR THE GENERAL FUND,
“A DIME-A-WEEK” VOLUNTARY CONTRIBUTION**

This is an annual computation for contributions received during the calendar year January 1 to December 31 of 2023. Contributions received after December 31, 2023, will be submitted with the 2023 Annual Report. This will require that Secretaries keep an accurate running total of these contributions during the calendar year so as to remit the proper amount with the Annual Report.

COMPUTATION OF GENERAL FUND, “A DIME A WEEK”

Total Voluntary contribution paid to the Chapter for the Dime-A-Week General Fund during 2023 \$ _____

ESTIMATE OF MEMBERS AT THE CLOSE OF THE YEAR AS A BASIS FOR NEXT REPORT

Whole number of members as shown on Line 8 on page 11 _____

DEDUCT

- Number of deaths during the year (Box #7, pg. 8) - _____
- Number demitted during the year (Box #8, pg. 8) - _____
- Number suspended during the year (Box #9, pg. 8) - _____
- Number expelled during the year (Box #11, pg. 8) - _____
- Dual members terminated during the year (Box #12, pg. 9) - _____
- Plural members terminated during the year (Box 12-A, pg. 9) - _____

PRESENT NUMBER OF MEMBERS:

► Present number of members per List of Members, Box #1, pages 1, 2, 3 and 4: _____

= _____ ← These two numbers **MUST** match
 _____ ←



I certify that the foregoing Report and statements therein are correct.

Witness my hand and Chapter seal this _____ day of January, 2024.

 Signature Secretary

 Print Name Secretary

Examined and approved by the undersigned.

 Signature Worthy Matron

 Print Name Worthy Matron

CHECK INFORMATION

Per Capita		International Headquarters Fund		Dime-A-Week	
\$	#	\$	#	\$	#