



Annual Grand Dues Report
Most Illustrious Charles F. Williams
Grand Council of Royal & Select Masters, Prince Hall Affiliation

In accordance to Article X Section 4, All reports are due in the Grand Recorder's Office by the 31st day of January. This report must be submitted by the Recorder and signed by the Thrice Illustrious Master no later than the 31st before a late fee is imposed of an additional \$10.00 per month thereafter. It must contain all the Illustrious Companions of the Council of the last report, either in good standing, omitted, demitted, suspended, expelled, or deceased.

Date: _____ **Year Paid :** _____
 _____ **Council No.** _____ **City** _____ **State** _____
 _____ **Rec.** _____ **T.I.M**
 _____ **Address** _____ **Address**
City _____ **State** _____ **Zip** _____ **City** _____ **State** _____ **Zip** _____
 _____ **Phone No.** _____ **Phone No.**

OFFICERS FOR THE YEAR

_____ **T.I.M.** _____ **C.G.**
 _____ **D.M.** _____ **C.C.**
 _____ **P.C.W** _____ **Steward**
 _____ **Recorder** _____ **Sentinel**
 _____ **Treasurer**

PAST THRIE ILLUSTRIOUS MASTERS

1. _____ 2. _____
 3. _____ 4. _____
 5. _____ 6. _____
 7. _____ 8. _____
 9. _____ 10. _____

Members on Roll payment tabulation

	Grand Dues	Memorial Fund	Total
Members on Roll _____	\$ _____	\$ _____	\$ _____
Members Suspended _____			
Members Demitted _____			
Members Deceased _____			
Members Reinstated _____	\$ _____	\$ _____	\$ _____
Members Greeted _____	\$ _____	\$ _____	\$ _____
Ways and Means _____	\$ _____		\$ _____
Total Remitted For _____	\$ _____	\$ _____	\$ _____

TIM Signature: _____

Recorder Signature: _____

1 Ways & Means \$20.00 annually; Greeted members @ \$8.00 each; Due \$9.00 @ member; Memorial \$1.00 @ member and reinstatement \$10.00 @ member. Please note new members are prorated from the time of greeting per 3 months.

Receipt to be returned to Council

Members on Roll payment tabulation			
	Grand Dues	Memorial Fund	Total
Members on Roll _____	\$ _____	\$ _____	\$ _____
Members Suspended _____			
Members Demitted _____			
Members Deceased _____			
Members Reinstated _____	\$ _____	\$ _____	\$ _____
Members Greeted _____	\$ _____	\$ _____	\$ _____
Ways and Means _____	\$ _____		\$ _____
Total Remitted For _____	\$ _____	\$ _____	\$ _____

Amount Received _____ Check/ Money Order Number _____ Cash _____	Date	Received by _____ Notes:- _____ _____ _____ _____ _____ _____ _____ _____ _____
Transaction #		
Seal		

_____ Grand Recorder signature