

RECORDER'S QUESTIONNAIRE 2019-20

Commandery: _____ **Date:** _____

	Filling		Ritual Number
	Own Station	Past Commander	
E. C. _____	[]	[]	_____
Gen. _____	[]	[]	_____
C.G. _____	[]	[]	_____
S.W. _____	[]	[]	_____
J.W. _____	[]	[]	_____
Pre. _____	[]	[]	_____
Tre. _____	[]	[]	_____
Rec. _____	[]	[]	_____
St.B. _____	[]	[]	_____
Sw.B. _____	[]	[]	_____
Ward. _____	[]	[]	_____
Sent. _____	[]	[]	_____

Membership

Total Members _____ Living in Indiana _____ Living within 50 miles (approx) _____
 Total out of State _____

Gains

Knighthood _____
 Affiliated _____
 Reinstated _____
Total Gained _____

Losses

Died _____
 Demitted _____
 Suspended _____
Total Loss _____ **Gain/(Loss)** _____

Number of petitions awaiting work _____

Number of petitions from last year _____

Conclaves (Meetings held)

Stated _____ Attendance - Average _____ Largest _____ Smallest _____
 Called _____ Attendance - Average _____ Largest _____ Smallest _____

Orders conferred

	Yes []	No []	Last Date	No. of Candidates
Red Cross	Yes []	No []	_____	_____
Malta	Yes []	No []	_____	_____
Temple	Yes []	No []	_____	_____

Recorder **Date**

Inspecting Officer **Date**