



TAR HEEL GRAND COMMANDERY

THGCINC FORM 9

ANNUAL REPORT

Annual Report for the Chivlaric Year 1-Jan 2018 to 31-Dec 2018

Commandery No. _____

MEETING DATE _____

MEETING TIME _____

Mailing Address _____

NC Zip Code _____

Meeting Location _____

NC Zip Code _____

Phone (If applicable) () _____

ELECTION RESULTS

THGCINC FORM 9

Eminent Commander _____

Address _____

NC Zip Code _____

Phone () _____ Email _____

Generalissimo _____

Address _____

NC Zip Code _____

Phone () _____ Email _____

Captain General _____

Address _____

NC Zip Code _____

Phone () _____ Email _____

Recorder _____

Address _____

_____ NC Zip Code _____

Phone () _____ Email _____

Treasurer _____

Address _____

_____ NC Zip Code _____

Phone () _____ Email _____

Commandery Membership Report

Number of Sir Knights on the rolls as of last annual report _____ A

Commandery Growth

Number of Sir Knights dubbed during the past year _____ B

Number of Sir Knights reinstated during the year _____ C

Number of Sir Knights demitted in during the year _____ D

TOTAL GROWTH (Add B plus C plus D) _____ E

Membership of Commandery with growth (Add A plus E) _____ F

Commandery Decrease

Number of Sir Knights dropped during the year _____ G

Number of Sir Knights deceased during the year _____ H

Number of Sir Knights demitted out during the year _____ J

TOTAL DECREASE (Add G plus H plus J) _____ K

Membership of Commandery (Take F and subtract K) _____ L

RECAPITULATION

1. Grand Commandery Tax (Line L x \$15.00) _____ at \$15.00 \$ _____

Separate Check

2. Benevonece Tax (Line L x \$5.00) _____ at \$5.00 \$ _____

Separate Check

This is the number of Sir Knights in the Commandery from the last report (ITEM A), adding the growth numbers (ITEM E) and subtracting the decrease numbers (ITEM K) from the membership total resulting in the membership (ITEM L)

3. Schalorship Assessment _____ 1 _____ at \$50.00 \$50.00

Separate Check

The Schalorship Assessment replaces the King Contest and is required of every commandery.

4. TOTAL AMOUNT DUE WITH THIS REPORT TO THE GRAND COMMANDERY \$ _____

This is the total of line 1 + line 2 and Line 3 added together.

Note: Your Commandery WILL Need to Submit 3 Separate Checks made payable to TARHEEL GRAND COMMANDERY, one line 1 Grand Commandery Tax, line 2 Benevolence Tax and line 3 Schalorship Assessment. When totaled all three (3) should total line 4.

Printed name of Eminent Commander

Printed Name of Recorder

Eminent Commanders Signature

Recorders Signature

DATE

DATE

*****REPORT MUST CONTAIN THE SEAL OF THE COMMANDERY *****

TO BE COMPLETED BY EMINENT GRAND RECORDER

Date report received _____ 20_____

Amount received with report \$ _____

THGCINC FORM 9

MEMBERSHIP ROSTER

SIR KNIGHT	ADDRESS	PAID	DROPPED
Beneficiary _____		Form 4 ___ Yes ___ No	

SIR KNIGHT	ADDRESS	PAID	DROPPED
Beneficiary _____		Form 4 ___ Yes ___ No	

SIR KNIGHT	ADDRESS	PAID	DROPPED
Beneficiary _____		Form 4 ___ Yes ___ No	

SIR KNIGHT	ADDRESS	PAID	DROPPED
Beneficiary _____		Form 4 ___ Yes ___ No	

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Beneficiary _____		Form 4 ___ Yes ___ No	

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Beneficiary _____		Form 4 ___ Yes ___ No	

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Beneficiary _____		Form 4 ___ Yes ___ No	

SIR KNIGHT	ADDRESS	PAID	DROPPED
Beneficiary _____		Form 4 ___ Yes ___ No	

SIR KNIGHT	ADDRESS	PAID	DROPPED
Beneficiary _____		Form 4 ___ Yes ___ No	

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

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Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

SIR KNIGHT	ADDRESS	PAID	DROPPED

Beneficiary _____ Form 4 ___ Yes ___ No

Dubbed and Reinstated Sir Knights

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___ Yes ___ No

Deceased and Demitted out Sir Knights

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

SIR KNIGHT	ADDRESS	
Beneficiary _____	Form 4	___Yes ___No

Past Eminent Commanders

SIR KNIGHT

Years Served
