

Year 20____

RETURN OF

_____ Chapter No. _____, Royal Arch Masons

Beginning Jan. 1, A.D. 20____, Ending Dec. 31, A.D. 20____

TO THE

GRAND CHAPTER

ROYAL ARCH MASONS

OF WASHINGTON

PLEASE READ CAREFULLY PROVISIONS OF THE CODE AND INSTRUCTIONS ON PAGE 2. THIS REPORT IS DUE JANUARY 1ST AND MUST BE IN THE HANDS OF THE GRAND SECRETARY NOT LATER THAN MARCH 1, SEE PENALTY ON PAGE 2.

Report received by the Grand Secretary _____, 20____

Amount for Grand Chapter Dues (per-capita)	\$ _____	
Amount for Elected Fees (additions)	\$ _____	
Amount for Degree Fees (additions)	\$ _____	(Less amount to Endowment fund)
Amount for Assessment (G.M. reception)	\$ <u>3.00</u>	
Amount for Endowment Fund (1/2 of degree fees)	\$ _____	
Contributions to Heart Foundation	\$ _____	

Total Dues, Fees, Assessment and Contributions \$ _____

Amount Paid _____, 20 ____ \$ _____

Balance Due from previous year (if any)	\$ _____
PENALTY DUE from previous year (if later than March 1 st)	\$ _____
Credit Due from previous year (if any)	\$ _____

Receipt No. _____

GRAND SECRETARY

TO THE HIGH PRIEST AND SECRETARY

This form is furnished for making your annual report to the Grand Chapter, as required by the following Grand Chapter Bylaws:

ANNUAL RETURNS

Every chartered chapter within the jurisdiction of this Grand Chapter shall complete and forward to the Grand Secretary annually, on forms, furnished by the Grand Secretary, a statement of all work completed from the first day of January to the last day of December. The report shall include: number of exaltations, affiliations, reinstatements, demits, suspensions, expulsions, 50-year members, plural members, deaths, non-affiliations in Lodge, suspensions for non-payment of dues, and Royal Arch Masons Children's Heart Foundation Life Members.

RETURNS – PENALTY FOR NOT MAKING

The annual report shall be completed and forwarded with the Grand Chapter dues to the Grand Secretary no later than the first day of March yearly. Each Chapter shall be fined \$5.00 per day for reports submitted after the first day of March. Any or all chapter representative(s) who do not submit their annual report may be debarred from all privileges of the Grand Chapter. Furthermore, a chapter's charter may be forfeited by vote of the Grand Chapter.

The extra copy is to be used for future reference by your chapter and is to be maintained as official records.

The Grand Secretary copy will be a part of the permanent records and must be complete and accurate

Read the forms carefully: TYPE ALL ENTRYs, if possible. If unable, print legibly with black ink.

GIVE ALL NAMES IN FULL (last, first middle) – No exceptions. Spell accurately and clearly.

Write NONE across blanks in which your Chapter has nothing to report.

Before mailing, carefully verify each name and date, and see that the certification on the last page is signed by the High Priest and attested by the Secretary. Be sure to seal the document with your Chapter Seal.

If all items are not filled out properly, the form will be returned for proper completion.

REVENUES – FEES

1. For each person elected to membership in the Chapter a fee of **\$5.00** is due.
2. For each degree conferred by a chapter, the fee shall be **\$2.00**. One dollar of which shall be deposited in the Grand Chapter Endowment Fund.
3. From each chartered chapter an annual fee of **\$6.00** plus **\$1.00** General Grand Chapter assessment (\$7.00 total) per each Royal Arch Mason on the rolls at the date of the annual return, as per capita tax.
4. An additional sum of **\$1.00** shall be collected from the membership of each chapter as a contribution to the "Royal Arch Masons Children's Heart Foundation." Companions who purchased a Life Membership in their chapter prior to the inception of the Royal Arch Masons Heart Foundation are exempt from the \$1.00 assessment. The chapter is likewise exempt.
5. An additional fee of **\$3.00** shall be paid by each Chapter to the Grand Chapter annually for our participation in the yearly reception for the Grand Master of Masons of Washington.
6. Chapters under dispensation shall not be required to pay dues but shall be required to pay \$1.00 for each degree conferred.
7. Chapters shall not be required to pay dues on indigent members whose dues have been remitted by the Chapter.
8. No chapter shall pay less than **\$25.00** per capita tax.

Chapter No. ____ RAM. Located at _____, in _____ County for
the year commencing January 1, 20 ____ A.D. and ending December 31, 20 ____ A. D.

THE STATED CONVOCATIONS

Are held on the _____
_____ time _____ A.M./P.M.

Excluding _____
Meetings are held at the _____ Masonic Temple
Address: _____

OFFICERS (Newly Elected and Appointed)

High Priest: _____ Phone: _____
Address: _____ Email: _____

King: _____ Phone: _____
Address: _____ Email: _____

Scribe: _____ Phone: _____
Address: _____ Email: _____

Treasurer: _____ Phone: _____
Address: _____ Email: _____

Secretary: _____ Phone: _____
Address: _____ Email: _____

Chaplain: _____ Phone: _____
Address: _____ Email: _____

Captain of Host: _____ Phone: _____
Address: _____ Email: _____

Principal Sojourner: _____ Phone: _____
Address: _____ Email: _____

Royal Arch Captain: _____ Phone: _____
Address: _____ Email: _____

Master of 3rd Veil: _____ Phone: _____
Address: _____ Email: _____

Master of 2nd Veil: _____ Phone: _____
Address: _____ Email: _____

Master of 1st Veil: _____ Phone: _____
Address: _____ Email: _____

Sentinel: _____ Phone: _____
Address: _____ Email: _____

List Organist (if applicable) in the Remarks Section

DEGREES CONFERRED SINCE LAST REPORT DATES WHEN DEGREES CONFERRED

FULL NAME (SURNAME FIRST)	BIRTH DATE	ELECTED	MARK MASTER	PAST MASTER	MOST EXCELLENT MASTER	ROYAL ARCH (Exalted)
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____	_____
7. _____	_____	_____	_____	_____	_____	_____

ATTENTION: Also provide address, phone number, wife name, Lodge name & number, Email address on all new members. Full name is a must. No initials, unless he does not have a middle name.

DUEL MEMBERS SINCE LAST REPORT

FULL NAME (SURNAME FIRST)	BIRTH DATE	WHEN ELECTED	OTHER CHAPTER	NUMBER	CITY	STATE
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____

AFFILIATED SINCE LAST REPORT

FULL NAME (SURNAME FIRST)	BIRTH DATE	WHEN ELECTED	CHAPTER DEMITTED FROM	NUMBER	CITY	STATE
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____

ALSO: For those affiliating from outside this jurisdiction please provide dates of the various degrees, especially the exaltation date. Be sure to register the affiliates "Mark" for your records.

REINSTATED SINCE LAST REPORT

FULL NAME (SURNAME FIRST)	DATE REINSTATED
1. _____	_____
2. _____	_____
3. _____	_____

4.

DEATHS SINCE LAST REPORT

FULL NAME (SURNAME FIRST)	DATE OF DEATH	PHP
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____
11. _____	_____	_____
12. _____	_____	_____

DEMITTED SINCE LAST REPORT

FULL NAME (SURNAME FIRST)	DATE DEMITTED
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

DROPPED FOR N.P.D. SINCE LAST REPORT
(SEE SECTION 260 OF BY-LAWS)

NAME IN FULL (SURNAME FIRST)	WHEN DROPPED
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

DROPPED IN LODGE

NAME IN FULL (SURNAME FIRST)

WHEN DROPPED

1. _____
2. _____
3. _____

SUSPENDED FOR UN-MASONIC CONDUCT SINCE LAST REPORT

NAME IN FULL (SURNAME FIRST)

WHEN SUSPENDED

CAUSE

1. _____
2. _____
3. _____

REJECTED ON PETITION FOR THE DEGREES

NAME IN FULL (SURNAME FIRST)

WHEN REJECTED

CAUSE

1. _____
2. _____
3. _____

EXPELLED SINCE LAST REPORT

NAME IN FULL (SURNAME FIRST)

WHEN EXPELLED

CAUSE

1. _____
2. _____
3. _____

DUAL MEMBERS ON ROLL

NAME IN FULL (SURNAME FIRST)	OTHER CHAPTER OF MEMBERSHIP	NUMBER	LOCATION
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____
7. _____	_____	_____	_____

FIFTY YEAR MEMBERS ON ROLL

List Names of All Fifty year Members now members of Chapter

NAME IN FULL (SURNAME FIRST)	DATE EXALTED
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

INDIGENT MEMBERS ON ROLL

(Whose dues were remitted in compliance with and under the provision of Section 300, Washington Royal Arch Code . This list is to be reviewed and approved each year by the Chapter and so noted in the minutes.)

NAME IN FULL (SURNAME FIRST)	CAUSE
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____

RECAPITULATION

Total Membership December 31, 20 ____ (from last years report)
(Do not alter this figure)

GAIN

Number EXALTED	_____	(from page 4 “degrees conferred)
Number AFFILIATED or DUEL	_____	(from page 4 “affiliated”)
Number REINSTATED	_____	(from page 5)
Number GAINED OTHERWISE	_____	(noted on page 8)
(Explain exceptions fully on Page 8)		
TOTAL GAINS	_____	

LOSS

Number DEMITTED	_____	(from page 5 “demitted”)
Number who DIED	_____	(from page 5 “deaths”)
Number DROPPED – NPD	_____	(from page 6 “dropped”)
Number LOST OTHERWISE	_____	(from page 6)
(Explain exceptions fully on Page 8)		
TOTAL LOSS	_____	

TOTAL NUMBER ROYAL ARCH MASONS

Summation of Last Report, Gains and Losses listed on this page.

In good standing, December 31, 20 ____

GRAND CHAPTER FEES, DUES, ASSESSMENTS AND CONTRIBUTIONS

TOTAL NUMBER ROYAL ARCH MASONS

In good standing, December 31, 20 ____ (FROM PAGE 9)

FROM THIS DEDUCT:

Number of indigent members (listed on page 7) _____

Number of 50 year members on page 7 (who are not listed as indigent) _____

GRAND CHAPTER PER CAPITA DUES TO BE PAID ON (A) _____

PER CAPITA AT \$7.00 FOR EACH MEMBER (A times \$7.00) \$ _____

ADDITIONS:

ELECTED _____ MEMBERS AT \$5.00 EACH \$ _____

CONFERRED DEGREES _____ @ \$2.00 PER EACH DEGREE \$ _____

GRAND MASTER'S RECEPTION ASSESSMENT \$ 3.00

SUBTOTAL \$ _____

ADJUSTMENT OF ERROR ON PREVIOUS RETURNS _____

(Provide explanation)

RAM CHILDREN'S HEART FOUNDATION

1. USE NUMBER AT BOTTOM OF PAGE 9, TOTAL NUMBER IN GOOD STANDING _____ TIMES \$1.00 ;
LESS INDIGENT AND 50 YR MEMBERS, \$ _____.

2. PERMANENT CONTRIBUTING (LIFE) MEMBERS FROM YOUR LIST; LESS INDIGENT AND 50 YR
MEMBERS. (ATTACH LIST OF "LIFE MEMBERS TO FOUNDATION"). _____ TIMES \$1.00 = \$ _____

SUBTRACT LINE 2 FROM LINE 1 = \$ _____

ADD THIS NUMBER TO THE **SUBTOTAL** TO DETERMINE THE:

**TOTAL DUE GRAND CHAPTER
AND HEART FOUNDATION** \$ _____

We certify that the foregoing is a true and correct return required to be reported to the Grand Chapter for the year ending December 31, 20____. Both signatures are mandatory and will be returned if one is left blank or omitted.

((CHAPTER SEAL))

Excellent High Priest

Secretary

CERTIFICATE FOR ESSENTIALS

I hereby certify that I have in my possession Grand Chapter Essentials No. (s) _____

((NOTE: List the actual SERIAL number (INSIDE COVER), not the number of copies)) ((If not filled in, return will be sent back to the chapter))

for use of _____ Chapter No. _____

and _____ for use of _____

(See Section 313, Royal Arch Code)

Secretary

Please attach list of RAM Children’s Heart Foundation “Life” members.

