



Treasurer's Assessment Statement Lodge _____

In accordance with the Auxiliary Constitution, the subordinate lodge treasurer will fill in two statements, forwarding one to the Auxiliary Secretary/Treasurer and retaining one for the lodge file.

PLEASE MAKE SURE YOU HAVE FILLED OUT THE REVERSE SIDE OF THIS STATEMENT.

Please include the name, reason and date for ADDITIONS AND DELETIONS, even if you have reported this on the membership report.

SEMI-ANNUAL ASSESSMENTS, DUE MARCH 15, _____ (members as of Jan. 1)

_____ members at \$25.00 each \$ _____
(The assessments is \$12.50 Grand Lodge dues plus \$12.50 convention dues per member)

Honorary members

_____ **\$10.00 for 30 yrs. Auxiliary membership or age 80 or older** \$ _____
(The assessments is \$5.00 Grand Lodge dues plus \$5.00 convention dues per member)

SEMI-ANNUAL ASSESSMENTS, DUE SEPTEMBER 15, _____ (members as of July 1)

_____ members at \$25.00 each \$ _____
(The assessments is \$12.50 Grand Lodge dues plus \$12.50 convention dues per member)

Honorary members

_____ **\$10.00 for 30 yrs. Auxiliary membership or age 80 or older** \$ _____
(The assessments is \$5.00 Grand Lodge dues plus \$5.00 convention dues per member)

GRAND LODGE ADMISSION FEE (\$10.00 per admission) \$ _____

TOTAL AMOUNT ENCLOSED (check no _____) \$ _____

THIS SEMI-ANNUAL ASSESSMENT STATEMENT AND CHECK MUST BE FORWARDED TO THE AUXILIARY INTERNATIONAL SECRETARY/TREASURER.

Treasurer _____

Address _____ City _____

State _____ ZIP _____ Email _____

Home Phone _____ Cell Phone _____

Signature _____ Date _____

Please fill in reverse side if membership has changed

MEMBERSHIP SUMMARY

ADDITIONS

Membership as of December 31, _____

Additions: January through June

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Additions _____

Total _____

ADDITIONS

Membership as of June 30, _____

Additions: July through December

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Additions _____

Total _____

DELETIONS

Deletions: January through June

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Deletions _____

Total _____

Total lodge membership June 30 _____

DELETIONS

Deletions: July through December

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Name _____
Reason/date _____

Deletions _____

Total _____

Total lodge membership Dec. 31 _____

NOTE: If a lodge has an admission or deletion after this statement has been submitted to the Grand Lodge, be sure to submit the necessary report form to the Grand Lodge and make the necessary adjustments on your copy of the statement.