

GRAND LODGE OF MARK MASTER MASONS OF QUEENSLAND

LODGE MEETING REPORT



(This form must be submitted to the Grand Secretary within 14 Days of meeting)

Lodge Name _____	No. _____	Date of Meeting _____
Work Performed _____	Members Present _____	Visitors Present _____
PROPOSITIONS (ADVANCEMENT/AFFILIATION)		

Name in Full (Block Letters)	Date of Birth	Occupation	Address (Including Postcode)	For Advancement or Joining If Joining list No of previous Lodge

DEGREES CONFERRED: (All degrees conferred for and by other Mark Lodges are to be listed)

Roll No.	Name in Full (Block Letters)	Date of Advancement	Date of Elevation	Mark	Roll No.	Name in Full (Block Letters)	Date of Advancement	Date of Elevation	Mark

AFFILIATIONS: (Include Mark in space/s above. Top row in left box)

Roll No.	Name in Full (Block Letters)	Date of Birth	Occupation	Rank	Mailing Address	Date of Affiliation	Name of Lodge Affiliated from	No	Const

CHANGE OF ADDRESS, etc: (To be completed only if personal details have changed)

Roll No.	Name in Full (Block Letters)	Date of Birth	Occupation	Rank	Mailing Address	Postcode	Date of Init. Or Affil

DEATHS, EXCLUSIONS & RESIGNATIONS:

Roll No.	Name in Full (Block Letters)	Rank	Date of Init. Or Affil.	How Removed (Dec., Res. or Excl)	Date Removed	Reason for Resignation	
							Signature _____ Secretary

INSTALLATION ONLY (P.M.'s Certificates will be issued on receipt of this notice)

Position	Name in Full (Block Letters)	Rank (eg PGJD)	Address	Phone Nos.		Date of Installation of WM/W.C.N. & Invest. Of Wardens & Overseers
				Home	Business	
W.M./W.C.N.						
I.P.M./I.P.C.						
S.W./S.S.						
J.W./S.J.						
M.O.						
S.O.						
J.O.						
SEC.						