

The Most Worshipful Prince Hall Grand Lodge, Free and Accepted Masons, PHA District of Columbia Incorporated

Masonic Temple 1000 U Street, NW Washington, D.C. 20001–4049 Office 202-462-8878 Fax 202-265-5620

Web: www.mwphgldc.com
Email: rwgsec@mwphgldc.com

ANNUAL REPORT

Date:	 	
Lodge: _	 	

Notice

This Annual Report is due into the Office of the Grand Secretary no later than November 5, 2018, with the exception of the page 11 (Election of Officers of 2019).

In case of neglect or refusal of any Lodge to pay its annual dues at the time herein specified, or on or before the next annual communication of the Grand Lodge, such Lodge may be stricken from the books of the Grand Lodge and their Warrant or Chapter considered null and void. But, upon proper application to the Grand Lodge, making full returns and paying all dues, such Lodge may be restored to its former rank and privileges, -- Article III, Section 4A, page 6, Corpus Juris, Constitution and By-Laws of the Most Worshipful Prince Hall Grand Lodge Constitution Free and Accepted Mason, P.H.A of the District of Columbia. Inc.

STATEMENT OF MEMBERSHIP, ASSESSMENTS MONIES DUE The Most Worshipful Prince Hall Grand Lodge November 1, 2017 thru October 31, 2018

Lodge:	_
"Each Lodge will complete the attached Grand Lodge Financial Ass Worksheet and insert a printed copy here!"	essment Calculation

ROLL OF PAST MASTERS AND PAST GRAND LODGE OFFICERS List Alphabetically

Lodge: _____

ID No		
	_ MI:	Last Name:
ID No		
	_ MI:	Last Name:
ID No		
First Name:	MI:	Last Name:
ID No		
First Name:	MI:	Last Name:
ID No		
First Name:	MI:	Last Name:
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First Name:	_ MI:	Last Name:
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First Name:	_ MI:	Last Name:
ID No		
First Name:	_ MI:	Last Name:
ID No	5.41	
First Name:	_ MI:	Last Name:
ID No.		
First Name:	_ MI:	Last Name:

MEMBERS ON THE ROLL

"Each Lodge will be provided a printed co for their respective Lodge. Update the pro	opy of the Grand Lodge Membership Database listing ovided Membership Roster and attach to your Annual Report"

ENTERED APPRENTICES ON THE ROLL List Alphabetically

Lodge:

Date of EP:			
First Name:		MI: _	Last Name:
Street Address:			
City:			State: Zip Code+4:
Phone:	Email:		
Date of EP:			
First Name:		MI: _	Last Name:
Street Address:			
City:			State: Zip Code+4:
Phone:	Email:		
Date of EP:			
First Name:		MI: _	Last Name:
Street Address:			
City:			State: Zip Code+4:
Phone:	Email:		
Date of EP:			
First Name:		MI: _	Last Name:
Street Address:			
Citv:			State: Zip Code+4:
Phone:	Email:		
Date of EP:			
First Name:		MI: _	Last Name:
Street Address:			
City:			State: Zip Code+4:
Phone:	Email:		
Date of EP:			
First Name:		MI: _	Last Name:
Street Address:			
City:			State: Zip Code+4:
Phone:	Email:		State: Zip Code+4:
Date of EP:			
First Name:		MI: _	Last Name:
Street Address:			
City:			State: Zip Code+4:
Phone:	Email:		_ State: Zip Code+4:

FELLOW CRAFTS ON THE ROLL

Lodge: _____

List Alphabetically

Date of FC:				
First Name:		MI:	Last N	lame:
Street Address:				
City:			State:	Zip Code+4:
Phone:	Email:			_ Zip Code+4:
Date of FC:				
First Name:		MI: _	Last N	lame:
Street Address:				
City:			_ State:	Zip Code+4:
Phone:	Email:			_ Zip Code+4:
Date of FC:				
				lame:
Street Address:				
City:			_ State:	Zip Code+4:
Phone:	Email:			
D ((FO				
Date of FC:				
				lame:
Street Address:				
City:			_ State:	_ Zip Code+4:
Phone:	Email:			
Data of EC.				
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Street Address:		1411	Lasi N	iaine
Street Address:			Stato:	Zip Code+4:
Phono:	Email		_ State	
Filone.	L IIIaII			
Date of FC:				
First Name:		MI:	Last N	lame:
Street Address:				
Citv:			State:	Zip Code+4:
- "J				

Date of FC: ______
First Name: _____ MI: ____ Last Name: _____

City: _____ State: ___ Zip Code+4: ____ Phone: ____ Email: ____

Phone: _____ Email: ____

Street Address:

<u>DECEASED</u> List Alphabetically

Lodge: _____

ID No. _____ Date of Death: ____ First Name: _____ MI: ___ Last Name: _____ ID No. _____ Date of Death: ____ First Name: _____ MI: ___ Last Name: ____ ID No. _____ Date of Death: _____ First Name: MI: Last Name: ID No. _____ Date of Death: ____ First Name: _____ MI: ___ MI: ___ Last Name: ____ ID No. Date of Death: ____ First Name: _____ MI: ___ Last Name: ____ ID No. ____ Date of Death: ____ First Name: MI: Last Name: **REINSTATED** ID No. ____ Effective Date: ____ First Name: _____ MI: ___ Last Name: _____ ID No. _____ Effective Date: _____ MI: ____ Last Name: ______ ID No. Effective Date: First Name: _____ MI: ___ Last Name: ____ ID No. _____ Effective Date: ____ First Name: _____ MI: ___ Last Name: _____ ID No. _____ Effective Date: ____ First Name: _____ MI: ___ Last Name: ____ ID No. _____ Effective Date: _____ First Name: _____ MI: ___ Last Name: ____

AFFILIATED

List Alphabetically

	Lodge:			
ID No	_ Effective Date:			
First Name:	_ Effective Date:	MI:	Last Name:	
ID No	_Effective Date:			
First Name:		MI:	Last Name:	
ID No.	Effective Date:			
First Name:	_ Effective Date:	MI:	Last Name:	
First Name:	_ Effective Date:	MI:	Last Name:	
First Name:	_ Effective Date:	MI:	 Last Name:	
First Name:	_ Effective Date:	MI:	Last Name:	
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Effective Deter				
First Name:		MI:	Last Name:	
Effective Date:				
First Name:		MI:	Last Name:	
			Last Name:	
Effective Date:				
First Name:		MI:	Last Name:	
	·			
First Name:		MI:	Last Name:	

SUSPENED

List Alphabetically

	Lodge:			
ID No.	Effective Date:			
ID NO.	_ Effective Date:			
First Name: _		IVII:	_ Last Name: _	
ID No.	_ Effective Date:			
First Name: _		MI:	Last Name: _	
ID No	_ Effective Date:			
First Name	_ Lifective Date:	MI-	 Last Name	
			_ Laot Hamo: _	
ID No	_ Effective Date:			
First Name: _		MI:	_ Last Name: _	
		EXPEL	LED	
				
ID No	_ Effective Date:			
First Name: _		MI:	Last Name: _	·
ID No.	Effective Date:			
ID NO.	_ Effective Date:	N/I.		
riist name: _		IVII	_ Last Name: _	
ID No.	_ Effective Date:			
First Name:		MI:	Last Name:	
ID No	_ Effective Date:			
First Name: _		MI:	_ Last Name: _	
		DEM	<u>ITTED</u>	
		<u> </u>		
ID No	_ Effective Date:			
First Name: _		MI:	Last Name: _	
IV NO.	_ Effective Date:	N/1-		
riist name: _		IVII	_ Last Name: _	
ID No.	Effective Date:			
First Name:		MI:	Last Name:	
ID No	_ Effective Date:			
First Name: _		MI:	Last Name: _	

DROPPED FOR NON-PAYMENT OF DUES

List Alphabetically Lodge:

ID No.	Effective Date:			
First Name:		MI:	 Last Name:	
ID No	_ Effective Date:			
First Name:		MI:	_ Last Name: _.	
ID N.	Effective Deter			
ID NO	_ Effective Date:	MI-		
riist Name		1911	_ Last Name.	
ID No.	Effective Date:			
First Name:		MI:	Last Name:	
ID No.	_ Effective Date:			
First Name:		MI:	_ Last Name: __	
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First Name	_ Effective Date:	MI:		
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ID No	_ Effective Date:			
First Name:		MI:	_ Last Name:	
ID No.	_ Effective Date:			
First Name:		MI:	_ Last Name: .	
ID No	Effective Date:			
First Name:	_ Lifeotive Date:	MI:	Last Name:	
ID No	_ Effective Date:			
First Name:		MI:	_ Last Name: __	
ID N.	Effective Dete			
ID NO.	_ Effective Date:	NAI.		
riisi naille		IVII	_ Last Name.	
ID No.	_ Effective Date:			
First Name:		MI:	Last Name:	
ID No	_ Effective Date:			
First Name:		MI:	_ Last Name: __	
ID No	Effoctive Date:			
First Name	_ Effective Date:	MI:	 Last Name	

OFFICERS ELECTED FOR 2019

Lodge: _____

Worshipful Master			
ID No			
	MI:	Last Name:	
Senior Warden			
ID No			
	MI:	Last Name:	
Junior Warden			
ID No			
First Name:	MI:	Last Name:	
Treasurer			
ID No			
First Name:	MI:	Last Name:	
Secretary			
ID No			
First Name:	MI:	Last Name:	

APPOINTED OFFICERS FOR 2019

Lodge:			
Senior Deacon			
ID No			
First Name:	MI:	Last Name:	
Junior Deacon			
ID No			
First Name:	MI:	Last Name:	
Senior Master of Ceremonies			
ID No			
First Name:	MI:	Last Name:	
Junior Master of Ceremonies			
ID No			
First Name:	MI:	Last Name:	
Senior Steward			
ID No			
First Name:	MI:	Last Name:	
Junior Steward			
ID No			
First Name:	MI:	Last Name:	
Chaplin			
ID No			
First Name:	MI:	Last Name:	
Marshall			
ID No			
First Name:	MI:	Last Name:	
Tiler			
ID No			
First Name:	MI:	Last Name:	
Assistant Secretary			
ID No			
First Name:	MI:	Last Name:	

CERTIFICATION OF THE LODGE ANNUAL REPORT November 1, 2017 thru October 31, 2018

	y that the above is a true statement of for the Fiscal Year of
And in testimony thereof, we have caused the seal of the Lodge to be Day of, 2018.	
Worshipful Master (Signature)	
Worshipiui Master (Signature)	
Senior Warden (Signature)	
Junior Warden (Signature)	
Approved by the Lodge	Respectfully Submitted
	Date:
	Secretary (Signature)
(Lodge Seal)	