



**DISTRICT DEPUTY GRAND MATRON'S REPORTING FORM**  
**CECELIA DUNLAP GRAND CHAPTER, OES**  
**OF KENTUCKY, INC., P.H.A.**

Chapter Name and Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name of Matron: \_\_\_\_\_ Name of Patron: \_\_\_\_\_

District: \_\_\_\_\_ Date of Visitation: \_\_\_\_\_

**District Deputies you are to complete this form, for each chapter you visit. Mail one copy to the Grand Worthy Matron, one copy to the chapter that you visit and retain a copy for your file. This form will be used to make your report at Grand Session.**

1. Total number of members reported in the Chapter \_\_\_\_\_
2. Total number of members present at time of this visit: \_\_\_\_\_
3. Was a copy of the Chapters charter present? \_\_\_\_\_
4. Was a copy of the By-laws present? \_\_\_\_\_ Last Date By-Laws were reviewed \_\_\_\_\_
5. Number of members added to the roll since last Grand Session: \_\_\_\_\_
6. For the same period of time how many members were: (a) Suspended \_\_\_\_\_ (b) Demitted in \_\_\_\_\_  
(c) Demitted out \_\_\_\_\_ (d) Deceased \_\_\_\_\_ (e) Reinstated \_\_\_\_\_
7. Has an audit been conducted of the books of the Secretary and Treasurer, for the past year? \_\_\_\_\_
8. Was a copy of the audit present for review? \_\_\_\_\_ Date of Last Audit \_\_\_\_\_
9. Does the Chapter make annual donations to some worthwhile Charity? \_\_\_\_\_  
If yes, Identify (1) \_\_\_\_\_  
(2) \_\_\_\_\_  
(3) \_\_\_\_\_
10. Does the Chapter have a Diamond Chamber? \_\_\_\_\_
11. Name of Chamber Guardian: \_\_\_\_\_

