



**CDGCOES Form 28 (New 1/21)**

Cecelia Dunlap Grand Chapter, OES of Kentucky, INC., PHA

**DISTRICT DEPUTY GRAND MATRON'S REPORTING FORM**

Annual Grand Communications

1. Name of District \_\_\_\_\_

2. Number of Members in your District \_\_\_\_\_

3. Number of deceased members since last Grand Communications \_\_\_\_\_

4. Number of new members since last Grand Communications \_\_\_\_\_

5. Are your districts having School of Instructions or any study sessions as a district?

If yes, explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Is the Chapter of Sorrow performed as a District? \_\_\_\_\_

If yes, explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Does your district have a District Burial Team? \_\_\_\_\_

8. Is your District involved in community service projects? If so, name them. If not, are plans being made to do so?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Give a short summary regarding your chapters. Examples: Charity works, scholarship, community involvement, etc. You may use the back or a separate sheet of paper.

\_\_\_\_\_ Signature of District Deputy Grand Matron

\_\_\_\_\_ District \_\_\_\_\_ Date

**DO NOT READ YOUR ITINERARY - PLEASE ATTACH TO THIS FORM**

Each District Deputy Grand Matron is to use this form at Grand Communications. Please prepare one copy for the Grand Worthy Matron, one copy for the Grand secretary and one copy for District Deputy Grand Matrons records.