



CDGCOES Form 25 (Revised 1/21)

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

SUBORDINATE CHAPTER WORTHY MATRON'S REPORTING FORM

1. Name of Chapter and Number _____
2. Number of Members on roll, as of this report _____
3. Number of Deceased Members, since last District Meeting _____
4. Number of New Members, since last District Meeting _____
5. Name and number of members in Nursing Home/Hospital, etc., who cannot attend meetings:

6. Name of your Worthy Patron _____
7. Name and Number of your Brother Lodge _____
8. Name of the Worshipful Master _____
9. Have you made plans to do any functions with the lodge?
10. Diamond Chamber Number: _____
11. Name of the Guardian: _____
12. LIST THREE (3) OF YOUR MOST **IMPORTANT** PROJECTS:
 1. _____
 2. _____
 3. _____

Give a short summary regarding your chapter. Examples: Charity work, scholarships, community involvement, etc.

_____ Signature of Worthy Matron

_____ District _____ Date

Each Worthy Matron is to use this form at the District Meeting; your report should **NOT** exceed three (3) minutes in length. Please prepare one copy to give to the District Deputy Grand Matron, one copy to the District Secretary and one copy to Grand Worthy Matron.

DO NOT READ YOUR ITINERARY - PLEASE ATTACH TO THIS FORM, IF NECESSARY