

COMPUTER SHEET - QUARTERLY MEMBERSHIP REPORT

_____ Grange # _____ in _____ Pomona # _____

Members Gained

| | |
|--------|------|
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |

Members Lost

| | |
|--------|------|
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |
| Name | How? |
| _____ | |
| Street | |
| _____ | |
| Town | |
| _____ | |
| State | Zip |
| _____ | |

Please list any additional gains / losses on the back of this form.

Please also list any address or name changes on the back of this form.

Membership by obligation form on reverse side.

Additional Gains / Losses and Address Changes

The Quarterly Affiliate Member Information form is no longer required.

Please complete the Obligation Form below as needed.

MEMBERSHIP BY OBLIGATION – QUARTERLY REPORT

Grange Name _____ Number _____ Quarter Ending _____

Candidate's Name _____ Date Obligation Received _____ Date Degrees Observed _____
