FOR OFFICE USE ONLY Processor Initials: _____ Date Processed: _____	☐ AFFILIATED ☐ DECEASED ☐ DEMITTED ☐ RAISED ☐REINSTATED ☐ REJOINED ☐ SUSPENDED	**MEMBER ACTIVITY REPORT**	**Lodge No:** |_____|_____|_____| **Lodge Name:** |__|__|__|__|__|__|__|__|__|__| |__|__|__|__|__|__|__|__|__|__|

Title: |_____|_____|_____|

Name:

|___||___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

First

|___||___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Middle

|___||___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Last

Effective Date of this Action: |___|___| --- |___|___| ---|___|___|

Month Day Year

Date of Birth: |___|___| --- |___|___| --- |___|___|

Month Day Year

Address:

|___||___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

Street, RFD, Post Office Box

|___||___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

City

|_____|_____| |___|___|___|___|___|___|___|___|___|___|

State **Zip Code**

☐ **Affiliated From:** **Lodge: _____ No.: _____**

☐ **Demitted To: Jurisdiction: _____**

Secretary's Signature _____ Lodge District # _____

Date Received in Grand Lodge Office: _____

Form Revised by: C. Lewis-11/4/03