

# IMPERIAL COURT --- DAUGHTERS

Original: Imperial Recordress

Copy to: Court File

## ANNUAL RETURN/CHARITY FUND DEPARTMENT REPORT

\_\_\_\_\_ Court No. \_\_\_\_\_

Oasis \_\_\_\_\_ Desert \_\_\_\_\_

TO \_\_\_\_\_

Month

Day

Year

Month

Day

Year

Address

Telephone

Email

Illustrious Commandress \_\_\_\_\_

First Lieutenant Commandress \_\_\_\_\_

Second Lieutenant Commandress \_\_\_\_\_

High Priestess \_\_\_\_\_

Oriental Guide \_\_\_\_\_

Treasurer \_\_\_\_\_

Recordress \_\_\_\_\_

First Ceremonial Daughter \_\_\_\_\_

Second Ceremonial Daughter \_\_\_\_\_

Inside Spy \_\_\_\_\_

Outside Spy \_\_\_\_\_

Marshal \_\_\_\_\_

Assistant Recordress \_\_\_\_\_

Advisor \_\_\_\_\_

\_\_\_\_\_  
Illustrious Commandress

(Print & Sign)

DO NOT USE RUBBER STAMP

\_\_\_\_\_  
Street and Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

(Court Seal)

\_\_\_\_\_  
Recordress

(Print & Sign)

DO NOT USE RUBBER STAMP

\_\_\_\_\_  
Street and Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

(LIST ALL DAUGHTERS OF THE COURT, INCLUDING OFFICERS)  
NAME – ADDRESS – TELEPHONE NO. – EMAIL – DONEE  
List Alphabetically – Last Name First

NAME	ADDRESS	TELEPHONE NO.	EMAIL	DONEE
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1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				

**(LIST ALL DAUGHTERS OF THE COURT, INCLUDING OFFICERS)**

NAME – ADDRESS – TELEPHONE NO. – EMAIL – DONEE

List Alphabetically – Last Name First

**NAME**

**ADDRESS**

**TELEPHONE NO.**

**EMAIL**

**DONEE**

26.

27.

28.

29.

30.

31.

32.

33.

34.

35.

36.

37.

38.

39.

40.

41.

42.

43.

44.

45.

46.

47.

48.

49.

50.

# RECAPITULATION

Members reported last year.....

## ADDITIONS

Members reinstated this fiscal year.....

Members created this fiscal year.....

Members transferring to Court .....

**TOTAL**

## DEDUCTIONS

Members dropped non-payment of dues.....

Members resigned.....

Members transferred.....

Members deceased.....

**TOTAL**

**ENDING TOTAL**

## FINANCE (Annual Fees)

Per Capita Tax.....

Charity Fund .....

Death Benefit .....

Health & Medical Research (HMR).....

Thanksgiving Service .....

Youth .....

Patrol Fund.....

**TOTAL**

## EXALTATIONS

Honorary Dues Paid

No. Paid

Amount

Honorary Past Commandress

\$

Honorary Past Imperial Commandress

\$

**TOTAL**

**TOTAL AMOUNT DUE**

## **Past Illustrious Commandress Names**

(Use additional sheet if needed)

## **Past Imperial Commandress Names**

## **Honorary Past Commandress Names**

("X" Those who have paid)

## **Honorary Past Imperial Commandress Names**

("X" Those who have paid)

## **Date/Member - Resigned**

**Date**

**Names - Created**

**Date/Names - Dropped**

**Date/Names - Reinstated**

**Date/Names - Transferred**

**Date/Names - Deceased**