

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

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.

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42.

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47.

48.

49.

50.

RECAPITULATION

Members reported last year.....	_____	Past Illustrious Commandress Names (Use additional sheet if needed)	
ADDITIONS	_____		
Members reinstated this fiscal year.....	_____		
Members created this fiscal year.....	_____		
Members transferring to Court	_____		
TOTAL	_____		
DEDUCTIONS			
Members dropped non-payment of dues.....	_____	Past Imperial Commandress Names	
Members resigned.....	_____		
Members transferred.....	_____		
Members deceased.....	_____		
TOTAL	_____		
ENDING TOTAL _____			
FINANCE (Annual Fees)			
Per Capita Tax.....	_____	Honorary Past Commandress Names ("X" Those who have paid)	
Charity Fund	_____		
Death Benefit	_____		
Health & Medical Research (HMR).....	_____		
Thanksgiving Service	_____		
Youth	_____		
Patrol Fund.....	_____		
TOTAL	_____		
EXALTATIONS			
Honorary Dues Paid	No. Paid	Amount	Honorary Past Imperial Commandress Names ("X" Those who have paid)
Honorary Past Commandress	_____	\$ _____	
Honorary Past Imperial Commandress	_____	\$ _____	
TOTAL	_____		
TOTAL AMOUNT DUE _____			
Date	Names - Created	Date/Names - Dropped	
		Date/Names - Reinstated	
		Date/Names - Transferred	
		Date/Member - Resigned	
		Date/Names - Deceased	