Grand Commandery

Knights Templar

State of Alabama

SEMI-ANNUAL REPORT Commandery No ___ K.T. OF ALABAMA

1. **DEGREES CONFERRED SINCE LAST REPORT MADE Date _____**

Names in Full (type or print clearly)	Date of Birth	Where Born	Elected	R.C.	Malta	K.T.

2. **AFFILIATED BY DEMIT OR TRANSFER SINCE LAST REPORT**

Names in Full (type or print clearly)	Date of Birth	Where Born	Elected	No.	Demitted/Commandery

3. **REINSTATED SINCE LAST REPORT**

Names in Full (type or print clearly)	Date of Birth	Where Born	Dates:Suspended	Reinstated

4. SUSPENDED NON PAYMENT OF DUES (SNPD)

Names in Full (type or print clearly)	Date	Names in Full (type or print clearly)	Date

5. DEMITTED OR TRANSFERRED

Names in Full (type or print clearly)	Date	Names in Full (type or print clearly)	Date

6. DEATHS

Names in Full (type or print clearly)	Age	Date	Names in Full (type or print clearly)	Age	Date

MEMBERS AS SHOWN BY LAST REPORT		
1. RECEIVED SINCE		
2. AFFILIATED SINCE		
3. REINSTATED SINCE		
TOTAL		
4. SUSPENDED SINCE		
5. DEMITTED SINCE		
6. DEATHS SINCE		
DEDUCT TOTAL		
TOTAL		

PRESENT MEMBERSHIP	
KNIGHTINGS	
KNIGHTING FEE ($10.00 each)	
GRAND COMMANDERY DUES ($18.00 each)	
LESS LIFE SPONSORS (AT $1.00)	
PREVIOUS UNPAID	
TOTAL DUES	
TOTAL REMITTANCE	

REPORT AS OF _____

DATE SUBMITTED _____

COMMANDERY NUMBER _____

CERTIFIED BY:
RECORDER _____