

# 2020 Annual Report of Councils of R&SM in MD

*Save after each section*

1. **THIS IS THE ONLY FORM TO USE.**
2. **DO NOT** boiler-plate from prior years' reports.
3. Begin the Summary Page with the number of Companions who hold your Council as their Mother Council. NO PLURAL Members are shown on this page.
4. **DO NOT** include any PLURAL MEMBER in your membership totals on the last page. There is a page provided to list them so a dues card can be provided.
5. A confirmation copy must be attached for the IRS 990N provided by the IRS.
6. This report is due to the Grand Recorder **NO LATER THAN 09/30/2020.**
7. Dues Cards are based on this report and cannot be generated until this report is submitted, reviewed, and entered into the database.
8. Please verify your list of TIMs. This is the list used to assign voting privileges. Be sure to indicate any TIM who is a PLURAL member...he does not represent your Council.
9. **SAVE** your form as you fill it in. When completed please SAVE, and email electronic your version to: **vhh.mdyr@gmail.com. Mail hard copy with checks to:**  
  

**Vernon Huebschman**  
**22238 Tolchester Beach Rd.**  
**Chestertown, MD 21620**
10. Councils may remit dues for any member they may choose. This decision does not reduce the amount owed to the Grand Council.
11. Please note if a member is suspended by Grand Lodge/Lodge Action. This must be resolved before the Council can reinstate such a member.

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

*Save after each section*

<b>COUNCIL ANNUAL REPORT</b>	
Council Name:	Council No:
Location/Address:	
Meeting Day & Time:	
<b>THRICE ILLUSTRIOUS MASTER</b>	
Name:	
Address:	
Email:	Phone:
<b>DEPUTY ILLUSTRIOUS MASTER</b>	
Name:	
Address:	
Email:	Phone:
<b>PRINCIPAL CONDUCTOR OF THE WORK</b>	
Name:	
Address:	
Email:	Phone:
<b>RECORDER</b>	
Name:	
Address:	
Email:	Phone:

**PLEASE CONTINUE ON NEXT PAGE**

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

*Save after each section*

<b>LIVING PAST TIM'S (IN ALPHABETICAL ORDER... names only required)</b>
1. Name:
2. Name:
3. Name:
4. Name:
5. Name:
6. Name:
7. Name:
8. Name:
9. Name:
10. Name:
11. Name:
12. Name:
13. Name:
14. Name:
15. Name:
16. Name:
17. Name:
18. Name:
19. Name:
20. Name:
21. Name:
22. Name:
23. Name:
24. Name:
25. Name:

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

<b>NEWLY GREETED COMPANIONS</b>	
Council:	
<b><i>Companion #1</i></b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b><i>Companion #2</i></b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b><i>Companion #3</i></b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b><i>Companion #4</i></b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b><i>Companion #5</i></b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

<b>Companion #6</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #7</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #8</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #9</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #10</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #11</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

<b>Companion #12</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #13</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #14</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #15</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #16</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	
<b>Companion #17</b>	
Name:	GLM#:
Address:	
Email:	Phone:
Date Exalted:	

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

## **REINSTATED COMPANIONS: LODGE ACTION REFERS TO LODGE SUSPENSIONS/EXPULSIONS**

Council:

### ***REINSTATED COMPANION #1***

Name: GLM#:

Address:

Email: Phone:

Date of Action: Date Exalted:

### ***REINSTATED COMPANION #2***

Name: GLM#:

Address:

Email: Phone:

Date of Action: Date Exalted:

### ***REINSTATED COMPANION #3***

Name: GLM#:

Address:

Email: Phone:

Date of Action: Date Exalted:

### ***REINSTATED COMPANION #4***

Name: GLM#:

Address:

Email: Phone:

Date of Action: Date Exalted:

### ***REINSTATED COMPANION #5***

Name: GLM#:

Address:

Email: Phone:

Date of Action: Date Exalted:

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

## PLURAL MEMBERS ADDED

Council:

### *COMPANION: PLURAL MEMBERS ADDED #1*

Name:

GLM#:

Address:

Email:

Phone:

Date of Action:

Grand Lodge Number:

### *COMPANION: PLURAL MEMBERS ADDED #2*

Name:

GLM#:

Address:

Email:

Phone:

Date of Action:

Grand Lodge Number:

### *COMPANION: PLURAL MEMBERS ADDED #3*

Name:

GLM#:

Address:

Email:

Phone:

Date of Action:

Grand Lodge Number:

### *COMPANION: PLURAL MEMBERS ADDED #4*

Name:

GLM#:

Address:

Email:

Phone:

Date of Action:

Grand Lodge Number:

### *COMPANION: PLURAL MEMBERS ADDED #5*

Name:

GLM#:

Address:

Email:

Phone:

Date of Action:

Grand Lodge Number:

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**



# 2020 Annual Report of Councils of R&SM in MD

*Save after each section*

<b>DEATHS, DEMITS, SUSPENSIONS.</b>			
Council:			
<b><i>COMPANION. DEATHS, DEMITS, SUSPENSIONS. #1</i></b>			
Name:		GL#:	
Died	Demitted	Suspended by Council	Suspended by Lodge
Lodge Action:		Date of Action:	
<b><i>COMPANION. DEATHS, DEMITS, SUSPENSIONS. #2</i></b>			
Name:		GL#:	
Died	Demitted	Suspended by Council	Suspended by Lodge
Lodge Action:		Date of Action:	
<b><i>COMPANION. DEATHS, DEMITS, SUSPENSIONS. #3</i></b>			
Name:		GL#:	
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:		Date of Action:	
<b><i>COMPANION. DEATHS, DEMITS, SUSPENSIONS. #4</i></b>			
Name:		GL#:	
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:		Date of Action:	
<b><i>COMPANION. DEATHS, DEMITS, SUSPENSIONS. #5</i></b>			
Name:		GL#:	
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:		Date of Action:	
<b><i>COMPANION. DEATHS, DEMITS, SUSPENSIONS. #6</i></b>			
Name:		GL#:	
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:		Date of Action:	

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

## ***COMPANION. DEATHS, DEMITS, SUSPENSIONS. #7***

Name:	GL#:		
Died	Demitted	Suspended by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## ***COMPANION. DEATHS, DEMITS, SUSPENSIONS. #8***

Name:	GL#:		
Died	Demitted	Suspended by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## ***COMPANION. DEATHS, DEMITS, SUSPENSIONS. #9***

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## ***COMPANION. DEATHS, DEMITS, SUSPENSIONS. #10***

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## ***COMPANION. DEATHS, DEMITS, SUSPENSIONS. #11***

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## ***COMPANION. DEATHS, DEMITS, SUSPENSIONS. #12***

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## ***COMPANION. DEATHS, DEMITS, SUSPENSIONS. #13***

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

## **COMPANION. DEATHS, DEMITS, SUSPENSIONS. #14**

Name:	GL#:		
Died	Demitted	Suspended by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## **COMPANION. DEATHS, DEMITS, SUSPENSIONS. #15**

Name:	GL#:		
Died	Demitted	Suspended by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## **COMPANION. DEATHS, DEMITS, SUSPENSIONS. #16**

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## **COMPANION. DEATHS, DEMITS, SUSPENSIONS. #17**

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## **COMPANION. DEATHS, DEMITS, SUSPENSIONS. #18**

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## **COMPANION. DEATHS, DEMITS, SUSPENSIONS. #19**

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

## **COMPANION. DEATHS, DEMITS, SUSPENSIONS. #20**

Name:	GL#:		
Died	Demitted	Suspend by Council	Suspended by Lodge
Lodge Action:	Date of Action:		

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

## ADDRESS CHANGES OR CORRECTIONS

### ***COMPANION: ADDRESS CHANGES OR CORRECTIONS #1***

Name:

Address:

Email:

Phone:

### ***COMPANION: ADDRESS CHANGES OR CORRECTIONS #2***

Name:

Address:

Email:

Phone:

### ***COMPANION: ADDRESS CHANGES OR CORRECTIONS #3***

Name:

Address:

Email:

Phone:

### ***COMPANION: ADDRESS CHANGES OR CORRECTIONS #4***

Name:

Address:

Email:

Phone:

### ***COMPANION: ADDRESS CHANGES OR CORRECTIONS #5***

Name:

Address:

Email:

Phone:

### ***COMPANION: ADDRESS CHANGES OR CORRECTIONS #6***

Name:

Address:

Email:

Phone:

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

## **PLURAL MEMBERS – THIS COUNCIL IS NOT THEIR MOTHER COUNCIL**

**\*Do Not Include These Companions In the calculations on the Summary Page.**

**\*List all Plural Members who claim another Council as their Home Council**

### ***COMPANION: ADDRESS CHANGES OR CORRECTIONS***

1. Name:

2. Name:

3. Name:

4. Name:

5. Name:

6. Name:

7. Name:

8. Name:

9. Name:

10. Name:

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

Save after each section

## GENERAL COUNCIL LIFE MEMBERSHIP

**\*LIST ALL COUNCIL MEMBERS WHO HOLD GG COUNCIL LIFETIME MEMBERSHIP**

### *GENERAL GRAND COUNCIL LIFE MEMBERSHIP #1*

Name:

Address:

Email:

Phone:

### *GENERAL GRAND COUNCIL LIFE MEMBERSHIP #2*

Name:

Address:

Email:

Phone:

### *GENERAL GRAND COUNCIL LIFE MEMBERSHIP #3*

Name:

Address:

Email:

Phone:

### *GENERAL GRAND COUNCIL LIFE MEMBERSHIP #4*

Name:

Address:

Email:

Phone:

### *GENERAL GRAND COUNCIL LIFE MEMBERSHIP #5*

Name:

Address:

Email:

Phone:

### *GENERAL GRAND COUNCIL LIFE MEMBERSHIP #6*

Name:

Address:

Email:

Phone:

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**

# 2020 Annual Report of Councils of R&SM in MD

*Save after each section*

<b>TOTALS: COUNCIL NAME and NUMBER</b>		
<b>Total Membership: September 1, 2019</b>		
<b>ADDITIONS</b>		
① Greeted		
Reinstatements		
<b>Total Additions</b>		
<b>SUBTRACTIONS</b>		
Deaths		
Suspensions (NPD's and Lodge Actions)		
Demits		
Lodge Suspension		
<b>Total Subtractions</b>		
<b>② TOTAL MEMBERSHIP: AUGUST 31, 2020</b>		
③ Number of General Grand Council Life Memberships		
Greeting Fee (\$10.00 X ①)		
Council Assessment (\$7.50 X ②)		
Deduct General Grand Council Life Memberships (-\$2.50 X ③)		
Check No.	Total Amount Paid to:	
	GRAND COUNCIL OF R&SM OF MARYLAND COUNCIL DONATIONS (make check payable to CMMRF)	
CRYPTIC MASONS MEDICAL RESEARCH -> Check #		

**\*MAKE SURE TO ATTACH YOUR IRS 990N WHEN SENDING IN THIS FORM.**