MASSACHUSETTS STATE GRANGE

ANNUAL REPORT OF _____ POMONA GRANGE NO. _____

FOR THE YEAR ENDING _____, 20

1. No. of members at the beginning of the year (do not include affiliate or associate members) _____
2. No. gained by initiation _____
3. No. gained by demit _____
4. No. gained by reinstatement _____
5. **ADD LINES 1, 2, 3, and 4** _____
6. No. lost by withdrawal _____
7. No. lost by demit _____
8. No. lost by death _____
9. No. lost by suspension _____
10. **ADD LINES 6, 7, 8 and 9** _____
11. **SUBTRACT LINE 10 from LINE 5** _____
12. No. of **Affiliate** members _____
13. **ADD LINE 11 and LINE 12** _____
14. **MULTIPLY LINE 13 by $0.50** _____
15. No. of **50 Year** Pomona Members _____
16. **MULTIPLY LINE 15 by $0.50** _____
17. **SUBTRACT LINE 16 from LINE 14** _____
18. No. of **Associate** members _____
19. **MULTIPLY LINE 18 by $5.00** _____
20. **ADD LINE 17 and LINE 19** _____

Send a check payable to the Massachusetts State Grange for the amount on line 20 with this report.

Master's signature: _____

Secretary's signature: _____

If the Secretary has changed or moved please provide the new address:

_____

_____

Date Report was completed:

_____

Grange Seal Here

NAMES OF ALL MEMBERS GAINED OR LOST DURING THE YEAR ***Print or Type***

Use the following to designate what type of member and manner in which a member was gained or lost:

Gain or Loss:

GI - gained by initiation
GD - gained by demit
GR - gained by reinstatement
LW - loss by withdrawal
LD - loss by demit
LDTH - loss by death
LS - loss by suspension

Member Type:

R - Regular Member
FY - 50+ Year Pomona member
AF - Affiliate
AS - Associate

NAME OF MEMBER GAINED or LOST	Gain or Loss	Member Type

Attach another sheet of paper if additional space is needed

Pomona Annual reports are due on or before June 30, Send the report no later than 5 days after June 30th. Forward the GREEN copy to the State Secretary and retain the YELLOW copy for your records.