

PLEASE PRINT CLEARLY. (or type) If additional room is needed to add or delete members, please use a second sheet of paper.

Please include date of birth or at least birth year for all members

Use the following codes to show **membership gains**.

- | | | |
|--|--|---------------------------|
| I Initiation (<i>Degree Work</i>) | O Obligation Ceremony | W Welcome Ceremony |
| R Reinstatement | DI Demit In (<i>Please indicate Grange where demit originated.</i>) | |

Use the following codes to show **membership classification**. (*It is assumed new members are individuals unless otherwise coded*)

- | | | |
|--|--|-------------------|
| P Primary Membership/1 st Grange | A Affiliation Membership/2 nd Grange | B Business |
| FP Family Plan | J Junior (<i>Ages 5-14</i>) | |

Use the following codes to show **membership losses**. Please include membership identification numbers (MID) if known.

- | | | |
|--|---|-------------------|
| NPD Non-Payment of Dues (<i>Cannot be used in 4th quarter</i>) | EA End Affiliation (<i>use ONLY for affiliates</i>) | DIED Death |
| REQ Request to be Dropped | DO Demit Out (<i>Please indicate Grange where demit is being received, if known</i>) | |

LAST Name FIRST Name Member ID Number (MID)	Male (M) Female (F)	Phone Number w/Area Code	GAIN See Codes Above	CLASS See Codes Above	LOSS See Codes Above	Street Address or PO Box City, State, Zip Code	Email Address	Date of Birth
EXAMPLE: Granger, Imagood MID #1111	F	111-111-1111	W	FP	REQ	12345 Grange Building Road Grangetown OR 11111	granger11@ abc.com	11-11-11

_____ No changes this quarter