## **MASSACHUSETTS STATE GRANGE**

ANNUAL REPORT OF		POMONA GRANGE NO.			
FC	OR THE YEAR ENDING	, 20			
1.	No. of members at the beginning of the year (do not include affiliate or associate members)  NAMES OF ALL MEMBERS GAINED OR LOST DURING THE YEAR Print or Type  Use the following to designate what type of member				
2.	No. gained by initiation	and manner in which a member was gained or lost:  Gain or Loss:			
3.	No. gained by demit	GI - gained by initiation GD - gained by demit			
4.	No. gained by reinstatement	GR - gained by reinstatement LW - loss by withdrawal	GR - gained by reinstatement Member Type:		
5.	ADD LINES 1, 2, 3, and 4	LD - loss by demit LDTH - loss by death	ss by demit FY - 50+ Year Pomona		
6.	No. lost by withdrawal	LS - loss by suspension AF - Affiliate AS - Associate			
7.	No. lost by demit	NAME OF MEMBER GAINED or LOST	MBER Gain or N		
8.	No. lost by death			Туре	
9.	No. lost by suspension				
10	. ADD LINES 6, 7, 8 and 9				
11	. SUBTRACT LINE 10 from LINE 5				
12	. No. of <b>Affiliate</b> members				
13	. ADD LINE 11 and LINE 12				
14	. MULTIPLY LINE 13 by \$0.50				
15	. No. of <b>exempt 50 Year</b> Members				
16	. MULTIPLY LINE 15 by \$0.50				
17	. SUBTRACT LINE 16 from LINE 14				
18	. No. of <b>Associate</b> 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.				
Ma	aster's signature:				
lf t	cretary's signature: he Secretary has changed or moved please				
provide the new address:			Attach another sheet of paper if additional space is needed		
Da	Grange Seal Here	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.