



GRAND LODGE A. F. & A. M. OF MONTANA


**LODGE OFFICER ELECTION REPORT
2009 - 2010 MASONIC YEAR**
PLEASE PRINT ALL INFORMATION

LODGE _____ NO. _____

 STATED MEETINGS: [Day(s) of week] _____ at _____ a.m./pm.
 during the month of _____ through the month of _____

If you have changed meeting dates and times have you amended your Lodge By-Laws ___ Yes ___ No

Physical address of Lodge _____

U.S. Mail address at Lodge _____

Instructions:

- Lodge elections are required by Code Section 25020 to be **held between the first regular meeting in April and the first regular meeting in May.**
- In accordance with Code Section 27030, service as Warden in any Jurisdiction renders the member eligible to election as Master. All the officers, except the Tyler, must be chosen from among the members of the Lodge. **No one shall be eligible to office who is not in good standing and who has not passed a satisfactory examination of the Montana proficiency in all three Degrees.**
- Complete this Form as soon as possible after the election and **return this form No later than 30 May to the Grand Secretary**. The MONTANA MASONIC LODGE DIRECTORY is scheduled for printing in early July so your prompt response is appreciated. A late response can significantly delay printing and distribution.
- Type or print the mailing address to which the officer wants to have Grand Lodge mail sent. **Verify with the officer the U.S. Mailing address that he wants used.**
- Type or **print the full name** (include Jr., Sr., III, etc., if applicable, but **no nicknames, please**).

CERTIFICATION:

I certify that this is a true and correct list of officers elected to serve this Lodge for the year 2009-2010.

(Lodge seal)

 Signed _____ Date _____
 (Secretary)

Please Print or Type all Information



PART II – ELECTED OFFICERS
2009 - 2010 MASONIC YEAR

WORSHIPFUL MASTER: _____

PREFERRED ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: Home: _____ Work: _____ Cell: _____

E-MAIL: _____ MM Prof: Date _____

SENIOR WARDEN: _____

PREFERRED ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: Home: _____ Work: _____ Cell: _____

E-MAIL: _____ MM Prof: date _____

JUNIOR WARDEN: _____

PREFERRED ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: Home: _____ Work: _____ Cell: _____

E-MAIL: _____ MM Prof: Date _____

TREASURER: _____

PREFERRED ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: Home: _____ Work: _____ Cell: _____

E-MAIL: _____ MM Prof: Date _____

SECRETARY (OR SEC/TREAS): _____

PREFERRED ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: Home: _____ Work: _____ Cell: _____

E-MAIL: _____ MM Prof: Date _____

LODGE INSTRUCTOR (RECOMMENDED): _____

PREFERRED ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: Home: _____ Work: _____ Cell: _____

E-MAIL: _____ MM Prof: Date _____

Appointed Officer Information is not required for this Report