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| District Deputy Name: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | |  | | | | | | | | | | District: | | | | | |  | | |  |
| Chapter Name: | | | | | |  | | | | | | | | | | | | | | | | | | | Number: | | | | | |  | | | | | | | |  | | Date of Visit: | | | | |  | | | | | | | | | | |  |
| Chapter Address: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | City: | | | |  | | | | | | | | | | | |  | ZIP: | | | |  | | | | | |  |
| High Priest: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Stated Convocation Day of the Month: | | | | | | | | | | | | | | | |  | | | | | | | | | | |  |
| High Priest’s Address: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | City: | | | |  | | | | | | | | | | | | ZIP: | | | |  | | | | | |  |
| Secretary: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | Stated Convocation Time of the Day: | | | | | | | | | | | | | | | |  | | | | | | | |  |  | |  |
| Secretary’s Address: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | City: | | | |  | | | | | | | | | | |  | ZIP: | | | |  | | | | | |  |
| Are Stated Convocations held jointly with any other body? Yes | | | | | | | | | | | | | | | | | | | | | |  | | | No | | |  | | | If so, which one(s)? | | | | | | | | | | |  | | | | | | | | | | | | | | |  |
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| **MEMBERSHIP** | | | | | |  | | |  | |  | |  | | |  | |  | |  | |  | | |  | | |  | | |  | | |  | | | |  | |  | | |  | |  |  | |  | | | |  | |  |  |  | |
| Programme Chairman: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Telephone No.: | | | | |  | | | | | | | |  |
|  | |  |  | | |  | | |  | |  | | | | This Year | | | | | Last Year | | | | | | | Change | | | | | | | | | |  | | | | | | | |  |  | |  | | | |  | |  |  |  | |
|  | | Dues-Paying Companions | | | | | | | | | | | | |  | | | | |  | | | | | | | 0 | | | | | | | | | |  | | | | | | | |  |  | |  | | | |  | |  |  |  | |
|  | | Life Members | | | | | | | | | | | | |  | | | | |  | | | | | | | 0 | | | | | | | | | |  | | | | | | | |  |  | |  | | | |  | |  |  |  | |
|  | | Per Capita Life Members | | | | | | | | | | | | |  | | | | |  | | | | | | | 0 | | | | | | | | | |  | | | | | | | |  |  | |  | | | |  | |  |  |  | |
|  | | Fifty-Year Companions | | | | | | | | | | | | |  | | | | |  | | | | | | | 0 | | | | | | | | | |  | | | | | | | |  |  | |  | | | |  | |  |  |  | |
|  | | Dual-Membership Companions | | | | | | | | | | | | | 0 | | | | | 0 | | | | | | | 0 | | | | | | | | | |  | | | | | | | |  |  | |  | | | |  | |  |  |  | |
|  | | Total: | | | | | | | | | | | | | 0 | | | | | 0 | | | | | | | 0 | | | | | | | | | |  | | | | | | | |  |  | |  | | | |  | |  |  |  | |
|  | | Companions 1 year in arrears: | | | | | | | | | | |  | | | | |  | Two years: | | | | | | |  | | | | | | Three or more years: | | | | | | | | | | | | |  | | |  | | | Why not suspended? | | | | | |  |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| **ASSETS** | | | | | |  | | |  | |  | |  | | |  | |  | |  | |  | | |  | | |  | | |  | | |  | | | |  | |  | | |  | |  |  | |  | | | |  | |  |  |  | |
| Treasurer: | | |  | | | | | | | | | | | | | | | | | | Telephone No. | | | | | | |  | | | | | | | | | | | | | | Last Audit: | | | |  | | | | | | | | | | |  |
|  | | Finance/Audit Committee | | | | | | | | | | Name | | | |  | |  | |  | |  | | |  | | |  | | |  | | |  | | | | Telephone Number | | | | | | | |  | |  | | | |  | |  |  |  | |
|  | | Companion | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | |  |  |  | |
|  | | Companion | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | |  |  |  | |
|  | | Companion | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | |  |  |  | |
|  | |  |  | | |  | | |  | Location | | | | | | | | | | | | | | | | | | | | | Account Number | | | | | | | | | | | | | | | | | | | | Balance/Value | | | | | |  |
|  | | Chequing Accounts | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | |  |
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|  | | Savings Accounts | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | |  |
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|  | | Other | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |  | | | | | |  |
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|  | | Total: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | $0.00 | | | | | |  |
|  | |  |  | |  | | | | Change From Last Year: | | | | | | | | | | $0.00 | | | | | | | | | | | | | | |  | | | | | | | | |  | | Last Year: | | | | | |  | | | | | |  |
|  | | Annual Dues: | | | | | |  | | | | | | Fees: | | |  | | | | | | | Life Membership Fee: | | | | | | | | | | | | | |  | | | | | | | Monthly Rent: | | | | |  | | | | | | |  |
| **ACTIVITIES** | | | | | | | | |  | |  | |  | | |  | |  | |  | |  | | |  | | |  | | |  | | |  | | | |  | |  | | |  | |  |  | |  | | | | |  |  |  |  | |
|  | | Event | | | | | | | | | No. Scheduled | | | | | | | No. Held | | | | | | | No. Officers Present | | | | | | | | | | |  | | | | | | | | |  |  | |  | | | | |  |  |  |  | |
|  | | Stated Convocations | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  |  | |  | | | | |  |  |  |  | |
|  | | Special Convocations | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | | |  | | | | | | | | |  |  | |  | | | | |  |  |  |  | |
|  | | Social (Describe) | | | | | | | | |  | | | | | | |  | | | | | | |  | | | | | | | | | | | Open or Tiled? | | | | | | | | |  |  | |  | | | | |  |  |  |  | |
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|  | | Does the chapter send a publication to the membership? | | | | | | | | | | | | | | | | | | | | |  | | | | | | If so, how often? | | | | | | | | | | |  | | | | | times per annum | | | | | | | |  |  |  |  | |
|  | | Number of dais officers present at most recent Grand Convocation: | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | in person; | | | | | | |  | | | | | by proxy | | | | | | | |  |  |  |  | |

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| **DEPUTY’S VISIT** | | | | | | |  | |  | | | |  | | | |  | | |  | | |  | | |  | | |  | | |  | | | |  | | | | | |  | | |  | | | | Chapter No. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Officers Present (check those who were present in their stations) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | |  | | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | |  | | Excellent High Priest | | | | | | | | |  | | | |  | | |  | | | Master of the 3rd Veil | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | |  | | King | | | | | | | | |  | | | |  | | |  | | | Master of the 2nd Veil | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | |  | | Scribe | | | | | | | | |  | | | |  | | |  | | | Master of the 1st Veil | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | |  | | Treasurer | | | | | | | | |  | | | |  | | |  | | | Steward | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | |  | | Secretary | | | | | | | | |  | | | |  | | |  | | | Sentinel | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | |  | | Chaplain | | | | | | | | |  | | | |  | | |  | | | Organist/Musician | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | |  | | Captain of the Host | | | | | | | | |  | | | |  | | |  | | | other officer | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | |  | |
|  | |  | | Principal Sojourner | | | | | | | | |  | | | |  | | |  | | | other officer | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | |  | |
|  | |  | | Royal Arch Captain | | | | | | | | |  | | | |  | | |  | | | non-officer companions | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | |  | | |  | |
|  | | Opened in proper form? | | | | | | | |  | | | |  | | | | Without ritual books? | | | | | | | | | | | |  | | |  | | | | | Formally received? | | | | | | | | | | | |  | | | | | | | |  | | | | | | | Without ritual books? | | | | | | | | | | | | | | | | | | |  | |  | |
|  | | Degrees conferred during official visit: | | | | | | | | | | | | | | | | | 4° | | |  | | |  | | | 5° | | |  | | | |  | | | | | | 6° | |  | | | |  | | | 7° | | | | | | | |  | | | | | | | | |  | | | | | | none | | |  | | | | | |  |  | | |  | |
|  | | When are degrees scheduled? | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | | | | | |  | | |  | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | |
|  | | Does chapter perform its own degree work? | | | | | | | | | | | | | | | | | 4° | | |  | | |  | | | 5° | | |  | | | |  | | | | | | 6° | |  | | | |  | | | | 7° | | | | | | | |  | | | | | | | | |  | | | | | | no | |  | | | | | | |  | | |  | |
|  | | Does the chapter have a plan to comply with the degree performance edict? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | Yes | | |  | | | |  | | | | No | | | | | | | | |  | | | | | |  | | | | | | | | | N/A |  | | | | | | |  | | |  | |
| **PARAFPHERNALIA/REGALIA** | | | | | | | | | | |  | | | | |  | | |  | | |  | | |  | | |  | | |  | | | |  | | | | | |  | |  | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | | | |  | | |  | |
|  | Item | | | | | | | Adequate Quantity | | | | | | | Condition  (1=Poor; 5=Excellent) | | | | | | | | | | | |  | | | | | | | | | | | | Item | | | | | | | | | | | | | | | Adequate Quantity | | | | | | | | | | | | | | | Condition  (1=Poor; 5=Excellent) | | | | | | | | | | | | | | | |  | | |
|  | Triangular Altar | | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | Cable-Tows | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
|  | Great Lights & Delta | | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | Keystone & Template | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
|  | Chapter By-Laws | | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | Wicket | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
|  | Ritual Books | | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | Arch | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
|  | Swords & Scabbards | | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | Ark | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
|  | Jewels | | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | Veils | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
|  | Robes | | | | | | |  | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | Other | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | |
|  | Describe any excess equipment that could be made available to others | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| **SPECIFIC RECOMMENDATIONS FOR IMPROVEMENT – BE POSITIVE!** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | |  | | | | | | |  | | | | | | | |  | | | | | |  | | |  | | |  | | |  | |
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|  | Signature of DDGHP | | | | | | | | | | | | | | | | | | | | | | |  | | | Printed Name of DDGHP | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | Date of Signature | | | | | | | | | | | | | | | | | | | | | | | | | |  |