

MWPHGL of Texas District Deputy Grand Master Annual Report

(Report due in Grand Master's Office by May 20 of each year)

LODGE NAME & NUMBER: _____

WORSHIPFUL MASTER: _____

SECRETARY: _____

ADDRESS: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

PHONE: _____

EMAIL: _____

EMAIL: _____

MEETING DATES: _____

MAILING ADDRESS OF LODGE: _____

CITY/ST/ZIP: _____

Condition of lodge hall or meeting facility:	Poor	Fair	Good
Meeting Place owned by Lodge?		Yes	No
If yes,			
Proof of <u>property and liability</u> insurance provided?		Yes	No
Is the property tax exempt?		Yes	No
If no,			
Are the property taxes being paid annually?		Yes	No
Provide proof of paid property taxes?		Yes	No
If no, amount of taxes owed? \$ _____			

A. Community Involvement – MUST SHOW EVIDENCE

1. Participated in Church visitation as a lodge?	Yes	No
2. Participated in a <u>Voter Registration</u> or <u>Get Out to Vote Drive</u> ?	Yes	No
3. Participated in Thanksgiving/ Christmas charity function(s)?	Yes	No
4. Participated in an Adopt-A-School or Mentoring program?	Yes	No
5. Participated in any other community activity as a lodge?	Yes	No
6. Participated in medical seminar or health fair?	Yes	No

B. Charity and Aid (Provide documentation)

7. Contacted and assisted widow(s)?	Yes	No
8. Contacted and assisted elderly brother(s)?	Yes	No
9. Assisted student(s) by giving scholarship(s)?	Yes	No
10. Donated to a local charitable foundation?	Yes	No

C. Masonic Ceremonies

11. Did Lodge perform a Corner Stone Ceremony (Current Year)	Yes	No
<i>If YES, provide copy of Dispensation</i>		
12. Did Lodge perform a Masonic Burial Ceremony (Current Year)	Yes	No

If Yes, Provide name(s) of Decedent(s) _____

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D. Membership

Number of members reported in prior year May Report: _____

Number of members raised this year: + _____

Number of members reinstated this year: + _____

Number of members demitted in this year: + _____

Number of members dropped (non-payment): - _____

Number of members demitted out: - _____

Number of members suspended or expelled: - _____

Number of members deceased: - _____

Total current number of members: = _____

Average number of members that attend meetings: _____

What is being done to attract new members? _____

E. Business

- | | | |
|---|-----|----|
| 13. Is the lodge consistently meeting on scheduled meeting day(s) | Yes | No |
| 14. Is the secretary's minute book current? | Yes | No |
| 15. Is the secretary properly receipting all monies received? | Yes | No |
| 16. Is the secretary turning over funds and receiving receipt from treasurer? | Yes | No |
| 17. Is the treasurer depositing monies in a timely manner? | Yes | No |
| 18. Are the treasurer's books current? | Yes | No |
| 19. Is an annual internal audit being conducted prior to election? | Yes | No |

F. Education and Instruction

- | | | |
|---|-----|----|
| 20. Does the lodge ritualistically open and close proficiently? | Yes | No |
| 21. Does the lodge follow procedures for processing petitions? | Yes | No |
| 22. Does the lodge follow the balloting process? | Yes | No |
| 23. Does the lodge follow procedures for initiating candidates? | Yes | No |
| 24. Does the Master provide instruction: | | |
| a. Ritualistic work (degree work) | Yes | No |
| b. Jurisprudence (constitution, by-laws) | Yes | No |
| c. Symbolism of Freemasonry (meaning) | Yes | No |
| d. Masonic Protocol | Yes | No |
| e. Leadership | Yes | No |
| f. Officer training (officers' duties) | Yes | No |

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G. General Attitude of Membership

25. Are the members generally satisfied with the:

- | | | |
|----------------------------------|------------|-----------|
| g. Condition of the lodge | Yes | No |
| h. Local lodge leadership | Yes | No |
| i. Grand Lodge leadership | Yes | No |
| j. Grand Lodge programs | Yes | No |

List the concerns of the membership: _____

The Lodge would like to see more training on: _____

DATE LODGE WAS CHARTERED: _____

Signatures: Master: _____ **Deputy:** _____

Date: _____ **Deputy's Fee for Visit:** _____

Deputy's Notes: _____

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Report Summary

LODGE NAME & NUMBER: _____

A. Lodge is involved in community activities: (1-6) None Some All

B. Lodge does charity work: (7-10) None Some All

C. Lodge performs Masonic Ceremonies: (11-12) None Some All

D. Lodge membership: Decreased Same Increased

E. Lodge follows normal operating procedures: (13-19) None Some All

F. Lodge receiving instruction in: (20-24)

a. Ritualistic work	None	Some	All
b. Masonic law and jurisprudence	None	Some	All
c. Symbolism	None	Some	All
d. Leadership and Masonic Protocol	None	Some	All

G. Attitude of Membership: (25) Poor Fair Good

District Deputy Assessment: (be specific and address all areas that are problems)

What are the deficit areas? _____

What is the plan to correct the deficit areas? _____

BELOW EXPECTATIONS

MEETS EXPECTATIONS

EXCEEDS EXPECTATIONS

District Deputy: _____ Date Completed: _____

(Deputy Seal)

District Deputy Annual Report
District # _____ Overview Sheet

TO BE COMPLETED BY THE DISTRICT DEPUTY ONLY

(only one report for the district)

	LODGE NAME & NUMBER	OVERALL CONDITION Good/Fair/Poor	ASSISTANCE REQUIRED?	DATE FOR SCHEDULED FOLLOW-UP
EX:	St. John Lodge #1	Fair	Yes	10/15/17
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2				
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