Grand Council Cryptic Masons the State of NY

Report of Council Visit by Grand Line Officer

DATE _____

Council _____ **#** _____ **District #** ___

CHECK "X" IF PRESENT "A" if acting " V " if visitor

District Deputy Grand Master _____

Illustrious Master	____	**Capt. of Guard**	____	**Chaplain**	____
Deputy Master	____	**Cond. of Council**	____		
P.C.W.	____	**Steward**	____		
Recorder	____	**Marshal**	____		
Treasurer	____	**Sentinel**	____		

Members present _____ **Total Membership** _____ **Visitors present**_____

__Observations__ and __Recommendations__ of the Grand Line Officer:

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

Submitted by: Signature and Office