GRAND CHAPTER ORDER OF THE EASTERN STAR RECOMMENDATIONS FOR HONORS FOR MERITORIOUS SERVICE ORDER OF THE EASTERN STAR

FOR HONORARY PAST MATRON/PATRON

Date		
TO:		
FROM:		
ADDRESS		
FOR MERITORIOUS SERVICE TO THE ORD	ER OF THE EASTERN STAR, WE RECOMME	END
SISTER/BROTHER		
	Street Address	
City	State	Zip
City	State	<u></u>
Telephone		
Date Sister/Brother was initiated	Chapter Name	No
She/He has met the following minimum	= -	
-	embers present at a regular meeting on	20
2. Served Subordinate Chapter for	at least 10 years.	
3. Is 75 years of age or older (proof	of age required)	
Please give the following information	n (add additional sheets if necessary)	
4. List offices held in Subordinate	Chapter with dates, (elected and appoint	ed).
5. Committees actively participate		·
6. List outstanding contributions to	Subordinate Chapter.	
7. Give reasons for recommending		
Please provide full information for the C	ommittee to use in making recommenda	tions to the Grand Chapter.
Worthy Matron		Secretary