



GRAND LODGE FRATERNAL ORDER OF POLICE

Gains In Membership Report



GAINS IN MEMBERSHIP

Reasons:

N - New Member

TI - Transferred In (from which Lodge)

REIN - Reinstated (Please Provide Old Membership #)

NOTE: Supplemental per capita tax is due and payable on all new members reported. When forwarding National Gains form, please attach check for State and Grand Lodge and forward to your State Lodge Secretary.

Name	Federal	City	Reason
Address	State	County	Mbrshp#
City,State,Zip Code	SSN		DOB
Name	Federal	City	Reason
Address	State	County	Mbrshp#
City,State,Zip Code	SSN		DOB
Name	Federal	City	Reason
Address	State	County	Mbrshp#
City,State,Zip Code	SSN		DOB
Name	Federal	City	Reason
Address	State	County	Mbrshp#
City,State,Zip Code	SSN		DOB
Name	Federal	City	Reason
Address	State	County	Mbrshp#
City,State,Zip Code	SSN		DOB

State: _____ Lodge#: _____ Date: _____ Secy: _____

(If more space is needed, please attach additional forms.)

_____ Date Entered
_____ National Staff Clerk