

MEETING MEMBERSHIP ADDITIONS, LOSSES

For the year (month/year) _____ to (month/year) _____

Starting Total _____ (Date _____) Ending Total _____ (Date: _____)

(For Monthly Meeting record-keeping purposes only. Do NOT return with Membership Statistics form.)

NEW MEMBERS

LOSSES

By Birth/Adoption:

Deceased:

	Name	Date
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

	Name	Date
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

By Request:

By Release or Withdrawal:

	Name	Date
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

	Name	Date
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

By Transfer:

By Transfer:

	Name	Date
1.	_____	_____
	From: _____	Mtg. _____
2.	_____	_____
	From: _____	Mtg. _____
3.	_____	_____
	From: _____	Mtg. _____
4.	_____	_____
	From: _____	Mtg. _____

	Name	Date
1.	_____	_____
	To: _____	Mtg. _____
2.	_____	_____
	To: _____	Mtg. _____
3.	_____	_____
	To: _____	Mtg. _____
4.	_____	_____
	To: _____	Mtg. _____

TOTAL ADDITIONS _____

TOTAL LOSSES _____