

BELOW IS TO BE FILLED OUT BY
SECRETARY OR RECORDER.
PLEASE MAKE THREE COPIES
(ONE FOR EACH BODY)

FEEES PAID:

CHECK #: _____

CASH: _____

ROYAL ARCH

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DATE READ DATE ELECTED DATE REJECTED

COUNCIL

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DATE READ DATE ELECTED DATE REJECTED

COMMANDERY

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DATE READ DATE ELECTED DATE REJECTED

RECORD OF WORK

| CHAPTER | COUNCIL | COMMANDERY |
|---------|---------|------------|
| M.M. | R.M. | O.R.C. |
| P.M. | S.M. | O.M. |
| M.E.M. | S.E.M. | O.T. |
| R.A. | | |

NAME _____

PETITION FOR THE
YORK RITE
OF
MINNESOTA

YOUR CONTACTS:

Grand York Rite: 952-948-7818

Grand Chapter Secy: 763-442-3462

for further info and a list of Chapters,
Councils and Commanderies please visit:

www.mnyorkrite.org



ROYAL ARCH MASONS

CRYPTIC MASONS

KNIGHTS TEMPLAR

