

MICHIGAN DeMOLAY CHAPTER OUTSTANDINGS REPORT FORM

CHAPTER NAME: _____ DATE SUBMITTED: _____

CHAPTER INSTALLATION DATE (MONTH / DAY / YEAR): _____

OUR CHAPTER OUTSTANDING DeMOLAY IS:

NAME (First, Middle, Last): _____

STREET ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE No. {HOME} (WITH AREA CODE): _____ {CELL} _____

OUR CHAPTER OUTSTANDING RITUALIST IS:

NAME (First, Middle, Last): _____

STREET ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE No. {HOME} (WITH AREA CODE): _____ {CELL} _____

OUR CHAPTER OUTSTANDING SPORTSMAN IS:

NAME (First, Middle, Last): _____

STREET ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE No. {HOME} (WITH AREA CODE): _____ {CELL} _____

OUR CHAPTER OUTSTANDING ADVISOR IS:

NAME (First, Middle, Last): _____

STREET ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE No. {HOME} (WITH AREA CODE): _____ {CELL} _____

SUBMITTED BY: CHAPTER 'DAD' ADVISOR OR ADVISORY COUNCIL CHAIRMAN:

NAME (PRINT): _____ TITLE (PRINT): _____

NAME (SIGNATURE): _____

the "CHAPTER OUTSTANDINGS REPORT FORM" MUST be sent no later than February 23, 2018, to . . .

DAD VINCE D'AGUANNO and
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