

**Indiana Grand Council  
of Cryptic Masons  
Council Service Award Nomination Form**

We the undersigned members of \_\_\_\_\_ Council No. \_\_\_\_\_  
of \_\_\_\_\_, Indiana respectfully submit the name of Companion  
\_\_\_\_\_ who is a member of \_\_\_\_\_  
Council No. \_\_\_\_\_ to be considered for the honor of receiving the Indiana Grand Council  
Service Award. He has devoted himself to the above named Council in the following ways:

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**Nominee's Information**

**Nominated by**

\_\_\_\_\_  
(Name in full)

\_\_\_\_\_

\_\_\_\_\_  
(Street Address)

\_\_\_\_\_

\_\_\_\_\_  
(City, State, and Zip)

\_\_\_\_\_ I.M.

Date: \_\_\_\_\_

\_\_\_\_\_ Rec.

(Council Seal)

\$10.00 processing fee must accompany this  
Nomination Form