



Grand Council of Cryptic Masons State of Indiana

Web: www.ingccm.org • Email: rigrec@ingccm.org

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:

NOMINEE'S INFORMATION

Full Name:

Address:

City:

State:

Zip:

NOMINATED BY

1st Companion:

2nd Companion:

I.M.

Recorder:

Date:

\$10.00 processing fee must accompany this Nomination Form

Council Seal