



Grand Council of Cryptic Masons State of Indiana

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

RED BOOK INFORMATION

Please submit this form immediately after election of officers

OFFICERS FOR 2020-2021

Please note this is now an electronic form, after elections fill out this form completely then do all the following:

1. Click the **Print Button** below to print a copy for your records
2. Click the **Save As Button** to save a copy of the form on your computer for your records.
3. Click the **Submit Button** to electronically email a copy of this form to PMIGM Red Book Editor David Ulrich, Grand Chapter R.E.G.S. Kris Phillips, Grand Council PMIGM R.I.G.R. Charles D. Wood, Jr., and G.K.T. Grand Recorder George A. Ingles, Jr.

Note: See the website for instructions on Submitting Forms if you have any trouble, Adobe continues to change the way this works so we will always update the website with the latest information.

Submitters Information

First Name

Last Name

Street Address

City

State

Zip

Home Phone

Mobile Phone

Email Address

Date of Birth

CHAPTER

Chapter Name *Chapter Phone*
Street Address
City *State* *Zip*
Meeting day/Time

High Priest

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

King

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Scribe

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Secretary

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

COUNCIL

Council Name *Council Phone*
Street Address
City *State* *Zip*
Meeting day/Time

Illustrious Master

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Deputy Illustrious Master

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Principal Conductor of Work

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Recorder

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

COMMANDERY

Commandery Name *Commandery Phone*
Street Address
City *State* *Zip*
Meeting day/Time

Eminent Commander

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Generalissimo

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Captain General

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*

Recorder

First Name *Last Name*
Street Address
City *State* *Zip*
Home Phone *Mobile Phone*
Email Address *Date of Birth*