

INSTALLATION REPORT

_____ Chapter No. _____, _____, Nebraska

Grand York Rite of Nebraska
2645 B Street
Lincoln, NE 68502
secretary-recorder@neyorkrite.org

Must be sent in by May 30th

This is to certify that on the _____ day of _____, 20____ the following Companions were installed as office bearers of this Chapter.

HIGH PRIEST: _____

KING: _____

SCRIBE: _____

TREASURER: _____

SECRETARY: _____

CAPTAIN OF THE HOST: _____

PRINCIPAL SOJOURNER: _____

ROYAL ARCH CAPTAIN: _____

MASTER OF THE THIRD VEIL: _____

MASTER OF THE SECOND VEIL: _____

MASTER OF THE FIRST VEIL: _____

SENTINEL: _____

CHAPLAIN: _____

_____, Secretary of the above Chapter

(Signed & Sealed)