

APPROVAL OF AMENDMENTS TO BYLAWS

_____ Chapter No. _____, O.E.S., _____, California,
 _____, 20____.

To: _____, Worthy Grand Matron

I, _____, Secretary of _____ Chapter No. _____, O.E.S.,
 do hereby certify that at a stated meeting of the Chapter, held on the _____ day of _____ 20____,
 the attached amendments to the Bylaws were proposed in writing, read in open Chapter, and set for consid-
 eration at the stated meeting of _____, 20____, and after special notice thereof to the
 members, the same were, by favorable vote of 2/3 of the members present and voting, regularly adopted on
 _____, 20____.

(Please check appropriate items below.)	Committee Use Only	
	Approved	Not Approved
<input type="checkbox"/> Change meeting location	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change meeting dates	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change/add meeting exceptions	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change meeting time	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change/add anteroom meeting time	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change/add/delete tenure for Secretary/Treasurer	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change fees	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change dues	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Change relief amount	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Provide for/delete/change paid life membership	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Provide for/delete Trustees	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Wherefore, I transmit the same to you for approval.

(Seal)

_____, Secretary

Note: See Sec. 128 of the Constitution and Laws. You must submit the following: (1) one copy of the sections before amended, (2) two copies of the section as amended, and (3) two certified (sealed) originals of this form.

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 The attached amendments referred to above are hereby approved this _____ day of _____, 20____.

(Seal)

_____, Worthy Grand Matron

Office Use Only		
Date Received in GC Office	Date Sent to C&B Committee	Date Received from C&B Comm.
_____	_____	_____
Date Sent to WGM	Date Received from WGM	Date Sent to Chapter
_____	_____	_____
		No. _____