## MOTHER ADVISOR IDENTIFICATION FORM

Supreme Assembly, IORG

A new form each year in January is necessary

Please type or print clearly

Name of Assembly: No.

Meeting Place:

Location of Assembly: Address

City State Zip

Meeting – Time Days

Name of Mother Advisor:

Address

City State Zip

Phone ( ) (Day) ( ) (Evening)

E-mail address

Send Mother Advisor Form to your

Supreme Officer

each January with Annual Report and any time a Mother Advisor change is made

to be forwarded to the Supreme Assembly Office

List names of those authorized to charge supplies to Assembly Account:

 ISSUED June 2006