



MAILING ROSTER OF ELECTED OFFICERS

**2025 – 2026**

NOTE: This form is to be completed immediately after your Commandery has completed its election for the year  
(Please type or print clearly)

**Commandery Name** \_\_\_\_\_ **No.** \_\_\_\_\_

**Eminent Commander**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Generalissimo**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Captain General**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Eminent Prelate**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Eminent Recorder**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Eminent Treasurer**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Total number of Sir Knights on in your Commandery \_\_\_\_\_ as of \_\_\_\_\_. Having conducted the \_\_\_\_\_  
Election of Officers of the above named Commandery, I the undersigned, certify that the information contained herein is  
true and correct.

\_\_\_\_\_  
Divisional Commander



MAILING ROSTER OF ELECTED OFFICERS

**2025 – 2026**

NOTE: This form is to be completed immediately after your Commandery has completed its election for the year  
(Please type or print clearly)

**Commandery Name:** \_\_\_\_\_ **No.** \_\_\_\_\_

**Eminent Junior Warden**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Eminent Senior Warden**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Eminent 1 Year Trustee**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Eminent 2 Year Trustee**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**Eminent 3 Year Trustee**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Total number of Sir Knights on in your Commandery \_\_\_\_\_ as of \_\_\_\_\_. Having conducted the \_\_\_\_\_  
Election of Officers of the above named Commandery, I the undersigned, certify that the information contained herein is  
true and correct.