**Secular Franciscan Order**

**Five Franciscan Martyrs Region**

**Annual Data Base Change Form**

Please submit this form in duplicate with your Fraternity’s Annual Report if there have been any changes, deaths, withdrawals, or transfers in your fraternity. Thank you.

**NAME OF FRATERNITY**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY, STATE and ZIP CODE**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFESSED** (Only if changes occurred):

 Name Member’s New Address/Phone/email

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**CANDIDATES**: (New)

 Name Date of Admission (Please use Data Base Form)

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**DEATHS**:

Name Date of Death Comments, if any

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**TRANSFERS *INTO* YOUR FRATERNITY**:

 Name Date In (Please use Data Base Form)

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**TRANSFERS or WITHDRAWALS *FROM* YOUR FRATERNITY**:

 Name Date Out Transferred to (Include Region, if not FFMR)

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Keep the original in your fraternity files and send a copy to the Regional Data Base Manager

Bonnie Barlow, OFS, email: bonniebarlowsfo@gmail.com Phone 321-724-2079

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