



Updated List of Trustees for \_\_\_\_\_ Masonic Angel Fund

Date Submitted \_\_\_\_\_

\_\_\_\_ Check here if no changes since last update and leave the form blank

**Primary Contact (This is where all MAF communications will be sent)**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Secondary Contact**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Tertiary Contact**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

***Please submit this information with your report***