



FRATERNAL CORRESPONDENCE FOR ARIZONA GRAND CHAPTER 2024

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

Your Chapter: \_\_\_\_\_

Grand Representative of: \_\_\_\_\_

Counterpart's name: \_\_\_\_\_

Counterpart's Chapter: \_\_\_\_\_

Will your Counterpart be at Arizona Grand Chapter?    Yes    No    Not sure.

Counterpart's Grand Chapter Session

Where: \_\_\_\_\_ When: \_\_\_\_\_

Name of Session: \_\_\_\_\_

Name of WGM: \_\_\_\_\_

Name of WGP: \_\_\_\_\_

Did you attend?    Yes    No

List 3 brief highlights of your visit or communication with your counterparts.

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

\_\_\_\_\_