Kingdom of Meridies
Reporting Form for Local Ministers of Arts and Sciences

Group: ____________________________________________________________

Seneschal’s SCA Name: ____________________________________________

Seneschal’s Mundane Name: _________________________________________

Seneschal’s Phone/E-mail: _________________________________________

Your local seneschal must receive a copy of this report.

This report covers the period (circle one):

First Quarter (Jan, Feb, Mar) due April 21
Second Quarter (Apr, May, Jun) due July 21
Third Quarter (Jul, Aug, Sep) due October 21
Fourth Quarter (Oct, Nov, Dec) due January 21

YEAR: ________________

Officer’s SCA Name: _____________________________________________

Officer’s legal name: _____________________________________________

E-Mail Address (if any): _________________________________________

Street address: _________________________________________________

City/State/ZIP Code: ____________________________________________

Phone: ___________________________ Membership type: ______________

Membership number: _______________ Expiration date: _______________

Please use this cover sheet for every quarterly report, noting all changes in address or membership status.

If the Regional Reporting Deputy accepts reports via e-mail, you may send them a message that contains your report.

Thank you very much for your continued service to Meridies!

Updated April 2007 by Mistress Maysun al Rasheeqa