## From the Desk of the Imperial Recorder

Greetings to all Nobles across this great Domain. The Imperial Recorder's Office is in the process of an audit\validation of all our member's membership information to embrace the technology that is available to make our organization more efficient and productive. We are requesting the following information from each Noble throughout the Domain. Please fill out this form and send it along with any supporting documentation to: AEAONMS, Inc., Attn: Validation, 2239 Democrat Road, Memphis, TN 38132-1802.

First Name:	
Middle Name:	
Last Name:	
Jr., Sr., III, etc. (If applicable)	
Date of Birth (MM/DD/YYYY)	
AEAONMS Card Number:	
Creation Date: (Provide copy of patent)	
Assistant Rabban Start and End Date:	
Chief Rabban Start and End Date:	
Potentate Start and End Date:	
Date Received the Potentate Exaltation	
Honorary Past Potentate	
Date Conferred:	
Hon. Past Imp. Potentate Date Conferred:	
Legion of Honor: Date	
Home Phone Number:	
Cell Phone Number	
Fax Number:	
E-mail Address:	
Temple #	
Temple Oasis	
Temple Desert	
Home Address:	
Home City:	
Home State:	
Home Zip Code:	
Country:	
Any other information along with documentation relative to your membership in the Shrine	

Thank you in advance for your help in this endeavor. Ronald Dickens