

GRAND TALL CEDAR'S REPORT
OF THE WILLIAM BURROWS MEMORIAL AWARD

Forest Name _____ No. _____

1.

Forest Represented by:	GTC	SDGTC	JDGTC	Scribe	Treas
Midwinter Conference					
Regional Conference					
Convention					
District Schools					

2. Date of official visits to the Forest by:

a. DDSTC _____ b. TCFTR _____

3. Name, number & location of other Forests visited and date of visitation:

a. Forest _____ Date _____

b. Forest _____ Date _____

c. Forest _____ Date _____

Title of program presented to one of the Forests visited and date:

Title _____ Date _____

4. a. Name of Forest Tall Cedar Foundation Chairman _____

b. Title of program presented _____ Date _____

c. Name of Forest Membership Committee Chairman _____

d. Title of program presented _____ Date _____

5. Grand Tall Cedar Proficiency Certificate recommended by DDSTC _____

_____ on _____

1. Have all reports been received when required?

a. - by TCFTR, Yes _____ No _____

b - by DDSTC, Yes _____ No _____

c - by Regional Director, Yes _____ No _____

d - by SFO, Yes _____ No _____

Date this report prepared

Signature of Grand Tall Cedar

Instructions: After the Grand Tall Cedar has prepared this form in triplicate, he obtains validation signatures of the DDSTC and TCFTR. Retaining one copy for himself, the Grand Tall Cedar mails or delivers original and one copy to the Regional Director. The Regional Director reviews, verifies, signs, retains one copy for his records, and forwards original to the Supreme Forest Office, who in turn validates and forwards original to the Committee on Awards designated as such by the Supreme Tall Cedar. Use additional paper as necessary to explain or expand on entries requiring additional space. Item numbers correspond to QUALIFYING RULES paragraphs.

DDSTC: Items 1,2a,4c,4d,5 have been validated. Exceptions:

Signature of District Deputy STC

TCFTR: Items 2b, 4a, 4b have been validated.

Comment:

Signature of Tall Cedar Trustee

Regional Director: Item 1 has been validated and the form has been verified for completeness.

Exceptions:

Comment:

Signature of Regional Director

SFO: Item 1 has been validated. Exceptions:

Signature of Supreme Scribe

THIS SPACE RESERVED FOR: AWARDS COMMITTEE

AWARD: Approved _____ Denied _____

Award Committee Chairman

Supreme Tall Cedar