

# Order of the Secret Monitor Benevolent Fund

Petitions when completed must be submitted to the Provincial or District Grand Recorder  
 Before forwarding to the Grand Recorder, 86 St. James's Street, London SW1A 1PL

**A**

1. PETITION FOR RELIEF GRANT BROTHER / WIDOW / DEPENDENT  
*(Please delete which is not applicable)* DATE

2. APPLICANT'S NAME       
*(Initials)* *(Surname)*

3. FORENAMES IN FULL

4. STYLE OR TITLE   
*(e.g. Mr, Sir, Brigadier)*

5. ADDRESS

(i)

(ii)

(iii)

(iv)

(v)

(vi) POSTCODE

6. PROFESSION / OCCUPATION

7. SPONSORING PROVINCE / DISTRICT

8. DATE OF BIRTH OF APPLICANT

9. SPOUSE DATE OF BIRTH   
*(If not Deceased)*

**B**

	10. INCOME (PER WEEK/MONTH)		EXPENDITURE (PER WEEK/MONTH)	
	<i>(Please delete which is not applicable)</i>		<i>(Please delete which is not applicable)</i>	
	PETITIONER	SPOUSE		
FULL TIME EMPLOYMENT	£ <input type="text"/>	£ <input type="text"/>	MORTGAGE INTEREST (NET)	£ <input type="text"/>
PART TIME EMPLOYMENT	£ <input type="text"/>	£ <input type="text"/>	NET RENT PAYABLE	£ <input type="text"/>
WORKING TAX CREDIT	£ <input type="text"/>	£ <input type="text"/>	GROUND RENT	£ <input type="text"/>
RETIREMENT PENSION	£ <input type="text"/>	£ <input type="text"/>	COUNCIL TAX (NET PAYABLE)	£ <input type="text"/>
PENSION CREDIT*	£ <input type="text"/>	£ <input type="text"/>	WATER RATES	£ <input type="text"/>
OCCUPATIONAL PENSION	£ <input type="text"/>	£ <input type="text"/>	ELECTRICITY	£ <input type="text"/>
INCOME SUPPORT	£ <input type="text"/>	£ <input type="text"/>	GAS	£ <input type="text"/>
JOB SEEKERS ALLOWANCE	£ <input type="text"/>	£ <input type="text"/>	SOLID FUEL / OIL	£ <input type="text"/>
INCAPACITY BENEFIT	£ <input type="text"/>	£ <input type="text"/>	INSURANCE (House & Contents Only)	£ <input type="text"/>
ATTENDANCE ALLOWANCE	£ <input type="text"/>	£ <input type="text"/>	TELEPHONE	£ <input type="text"/>
DISABILITY LIVING ALLOWANCE	£ <input type="text"/>	£ <input type="text"/>	TELEVISION (Rental Including Licence)	£ <input type="text"/>
MOBILITY ALLOWANCE	£ <input type="text"/>	£ <input type="text"/>	GARDEN MAINTENANCE	£ <input type="text"/>
CARER'S ALLOWANCE	£ <input type="text"/>	£ <input type="text"/>	HOME HELP CHARGES	£ <input type="text"/>
INTEREST FROM INVESTMENTS	£ <input type="text"/>	£ <input type="text"/>	FOOD & HOUSEHOLD GOODS	£ <input type="text"/>
OTHER INCOME OR STATE AID	£ <input type="text"/>	£ <input type="text"/>	CAR, FUEL MAINTENANCE, MOT ETC	£ <input type="text"/>
<b>TOTAL</b>	£ <input type="text"/>	£ <input type="text"/>	BANK LOAN / Overdraft / Credit Cards	£ <input type="text"/>
			<b>TOTAL</b>	£ <input type="text"/>

\*(N.B. a copy of the Department of Works and Pensions Assessment notice is required if the PENSION CREDIT box is completed)

11. DETAILS OF PETITIONERS CAPITAL

**CAPITAL / SAVINGS :-** *Please give details of ALL funds held*

CURRENT ACCOUNT	£ <input type="text"/>	POST OFFICE	£ <input type="text"/>
DEPOSIT ACCOUNT	£ <input type="text"/>	PREMIUM BONDS	£ <input type="text"/>
BUILDING SOCIETY	£ <input type="text"/>	SAVINGS CERTIFICATES	£ <input type="text"/>
		RETIREMENT BONDS	£ <input type="text"/>
		OTHER	£ <input type="text"/>

INVESTMENTS (CURRENT MARKET VALUE), PEPs, ISAs SHARES, ETC *(Please give details on the reverse)*



**D**

**GRANTS RECEIVED**

THE PETITIONER HAS RECEIVED THE FOLLOWING GRANTS FROM:

MARK BENEVOLENT FUND

AMOUNT £

DATE

THE GRAND CHARITY (CRAFT)

AMOUNT £

DATE

MASONIC TRUST FOR GIRLS AND BOYS

AMOUNT £

DATE

PROVINCIAL OR DISTRICT GRAND CONCLAVE

AMOUNT £

DATE

CONCLAVE

AMOUNT £

DATE

TOTAL AMOUNT £

**VISITING BROTHER'S REPORT**

HAVING REGARD TO THE PETITIONERS FORMER CIRCUMSTANCES AND THE EFFECTS OF NOW HAVING TO MAINTAIN HIMSELF / HERSELF ON A LIMITED INCOME ALSO ANY OTHER ITEM OF EXPENDITURE WHICH IT IS FELT SHOULD BE MADE KNOWN TO THE GENERAL BOARD.

**DETAILS OF VISITING BROTHER**

NAME *(In block letters)*

*(Initials)*

*(Surname)*

FORENAMES IN FULL

CONCLAVE No.

ADDRESS

(i)   
(ii)   
(iii)   
(iv)   
(v)

(vi) POSTCODE

E-MAIL

TELEPHONE

HOME

WORK

MOBILE

SIGNATURE

DATE

PLEASE PROVIDE A REPORT ON A SEPARATE SHEET OF PAPER ONLY IF YOU THINK IT IS NECESSARY TO EXPLAIN FURTHER DETAILS

