

Most Worshipful Prince Hall Grand Lodge, F. & A. M. of Iowa

**APPLICATION FOR BEBEFITS DUE FROM THE RELIEF DEPARTMENT**

To , Grand Master:

 This Application is hereby made to the Relief Department of the Grand Lodge for benefits due on account of the death of Brother

a late member of Lodge No. at , Iowa.

1. Date and place of birth:
2. Date and place of death:
3. Has been in good standing in the lodge for the past four years:
4. If not, when did he last become a member:
5. Has he any heirs:
6. To whom shall the benefits be paid:
7. Relationship:
8. Address: No. Street Apt/Unit # City State Zip Code
9. Remarks:

We certify that the foregoing answers are correct to the best of our knowledge and belief.

 Signed: W. M.

(Lodge Seal)

 Sec’y

 Date of Filling:

Note: When married women are mentioned, use full name.

Send this copy to the Grand Master’s Office.