

DOWN MASONIC WIDOWS' FUND

Application Form for Financial Assistance / Renewal of Assistance

	District Charity Committee. Lodge No		Present Band		
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APPLICANT DETAILS

Surname		Tick this box if widow lives on her own <input style="float: right;" type="checkbox"/>
First Names		
Address		
Postcode		
Tel No		
Date of Birth		

Housing Type	Own House
	Relative's House
	Rented House
	Sheltered /Fold
	Nursing Home

(Tick only one)

Details of Masonic Connection (New applications only)

My Husband		Name		of Lodge No:-	
Father		Member From:-		To:-	
Son		Date of Death:-		Age:-	
Brother		Occupation:-		Annual Income	

(Tick one)

Lodge Almoner / Visiting Brother Details

Name: (Print)		Date of Visit:-	
Signature:-		Mobile No:-	
Email:(Print)		Tel No:-	

To be completed by the Officers of the Lodge.

We recommend the foregoing application and certify that, to the best of our belief, the information contained within this form is correct.

Signature of Worshipful Master	
Signature of Treasurer	
Signature of Secretary	

<div style="border: 1px solid black; border-radius: 50%; width: 60px; height: 60px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <div style="text-align: center;">Lodge Seal</div> </div>	Date:-	
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Secretary's Tel no:-	
Secretary's Email:-	

Completed form should be sent to the Secretary of **Your District Charity Committee in good time!!**

To be completed by the District Charity Committee.

Signature of Chairman	
Signature of Secretary	
Date Recommended by Charity Committee	

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<u>WEEKLY INCOME</u>	
Widow's Pension	£
State Pension	£
Occupational Pension	£
Late Husband's Employer Pension	£
Pension Credit	£
Incapacity Benefit / ESA	£
Disability Living Allowance	£
Attendance Allowance	£
Income Support	£
Employment	£
Family Contribution	£
Investment Income	£
Rental Income	£
Other:-	£
	£
	£
TOTAL <u>WEEKLY</u> INCOME	£

<u>WEEKLY HOUSING COSTS</u>		
Mortgage Repayments <u>per week</u>	£ <input style="width: 100px;" type="text"/>	
Rates Gross	Less Rebate	Net Rates / Week
£ <input style="width: 100px;" type="text"/>	£ <input style="width: 100px;" type="text"/>	£ <input style="width: 100px;" type="text"/>
Rent Gross	Less Rebate	Net Rent / Week
£ <input style="width: 100px;" type="text"/>	£ <input style="width: 100px;" type="text"/>	£ <input style="width: 100px;" type="text"/>
TOTAL <u>WEEKLY</u> EXPENDITURE FOR MORTGAGE, RATES & RENT		£ <input style="width: 100px;" type="text"/>
<p>Please note that details of general expenditure and living costs are not required, only Mortgage, Rates and Rent where applicable.</p>		

APPLICANT'S ASSETS, CAPITAL Etc		
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Details	Value	Comments
Own Dwelling House	£	
Investments valued at	£	
Current Bank Account	£	
Deposit Account	£	
Post Office Account	£	
Building Society / ISAs	£	
Land or other dwellings	£	For land state acerage.

Should any applicant omit to give a full statement of income from every source, or withhold any information required by this form and the omission subsequently becomes known the grant will be liable to be withdrawn.

The security and privacy of your personal information is very important to us. We will use the data you give to us for administration and analysis. I understand that the information given in this form and any supplementary information provided will be stored and processed by DMWF in accordance with the Data Protection Act 1998.

Signature of Applicant

Date:-

Almoner / visiting Brother's observation on health & conditions:-

Has widow applied for:-

PENSION CREDIT	YES / NO
RENT / RATE REBATE	YES / NO