

**APPLICATION FOR ASSISTANCE FROM THE BENEVOLENT FUND
OF THE GRAND CHAPTER OF CALIFORNIA, ORDER OF THE EASTERN STAR**

To _____ Chairman, Benevolent Fund Committee, Area No _____

Dated at _____, on _____, 20_____

Applicant: _____ Date of Birth: _____ Member # _____
(please print)

Address: _____ Phone: (_____) _____
(please print)

A Member of _____ Chapter No. _____ of _____

How long a member of this Chapter ? _____ Of the Order? _____ Plural Member? _____

If so, name of second Chapter: _____ Chapter No. _____ of _____

Masonic Relationship: _____ who is a member of _____ Lodge No. _____

F.&A.M. of _____ Name of Master Mason: _____

Reason for application to Fund: _____

Has assistance been given you by your Chapter? _____ By the Blue Lodge? _____ By any other organizations? _____

If so, please explain when assistance received, from whom and the amount with which you have been assisted: _____

Please list all current means of income and the source of each: _____

Potential additional income or assistance and its source: _____

Do you have a savings account? _____ Balance in savings account: \$ _____

Do you have a checking account? _____ Balance in checking account: \$ _____

Do you own any property either jointly or severally? _____ (Include Real Estate, Stocks, Bonds, Safety Deposit Boxes.)

Please list property, nature and its current value: _____

To be used by the Benevolent Fund

Amount of assistance recommended: \$ _____ (Monthly) \$ _____ (Lump Sum)

Approved: _____ Area Chairman of Area _____
(Print Name)

Approved: _____ General Chairman, Benevolent _____
(Print Name)

Sec. 404. **EXTENT OF RELIEF.** Relief shall not exceed the total sum of one thousand dollars (\$1,000.00) to any one beneficiary, except when necessary aid is not or cannot be obtained otherwise; payable at one time or in such sums periodically as in the discretion of the Benevolent Fund Committee shall be deemed advisable.

Further provided, that the maximum of aid to any one beneficiary shall not exceed the total sum of five thousand dollars (\$5,000.00), except in extreme emergencies, where additional aid may be extended in an amount of three thousand five hundred dollars (\$3,500.00) upon approval of the Chairman. Any member who has received the maximum amount to which he/she is eligible from J. Clifford Lee Memorial Cancer Fund and Marguerite Rennie Memorial Fund, and who has been a member of this jurisdiction for a period of five years, may receive an additional three thousand five hundred dollars (\$3,500.00) from the Benevolent Fund.