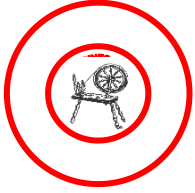


*Most Ancient Union Grand Court
Heroines of Jericho ~ Florida & St. John, U.S.V.I.
Jurisdiction, P.H.A.*

Working under the protection of the
Most Worshipful Union Grand Lodge ~ Free and Accepted Masons PHA
Florida & Belize, Central America & St. John, U.S.V.I. Jurisdiction, Inc.

PROOF OF DEATH FORM



Deceased Member: _____ Date of Death: _____

Beneficiary: _____ Phone: _____

Address: _____

I hereby declare that I am the only Beneficiary of any Donation to be received from the Most Worshipful Union Grand Court Heroines of Jericho, PHA, Florida Jurisdiction. If any other person petitions this organization for a donation for the above deceased member and prove themselves otherwise worthy, I will take full responsibility to pay the amount due them or settle any disputes that may arise and hold the Most Worshipful Union Grand Court Heroines of Jericho, PHA, Florida Jurisdiction harmless and not liable for any further donation.

Beneficiary Signature: _____ Date: _____

Court Name: _____ Court No.: _____

Matron Name: _____ Phone: _____

I hereby certify that the above named deceased member was a member in good standing with this Local Court. I further attest that the following required documents are attached with this form and is being submitted to the C.B.A. Secretary **within 45 days of the death of this member.**

Death Certificate Certificate of Membership **or** Proof of Beneficiary Affidavit
Most Ancient Matron Signature: _____ Date: _____

Court Secretary Signature: _____ Date: _____

C.B.A. OFFICIAL USE ONLY

Date Received: _____ C. B. A. Secretary Signature: _____

GMAM Signature: _____ Date: _____

Claim No.: _____ Check # _____ Check Date: _____ Amount: \$ _____

Beneficiary name on Last Annual Return: _____ Year _____

Rejected: (*State Reason*): _____

CBA Signature: _____ Date: _____

GMAM Signature: _____ Date: _____

Mail to: Heroine Chyrstalia Blyden
Grand Court CBA Administrator
249 Park Tree Terrace, Apt. #1122
Orlando, FL 32825