DISPENSATION IN RESPECT OF A MASTER ELECT

To be completed by the Master and Secretary

Lodge Secretary: This Form is to be completed and sent to the Provincial/District Grand Secretary (with cheque/BACS receipt)

Provincial/District Grand Secretary: Please forward with cheque to The Registrations Department, Mark Masons' Hall, 86 St. James's Street, London SW1A 1PL, or via email, only if paying by BACS and accompanied with BACS receipt to registrations@mmh.org.uk

Any request for a dispensation received less than 21 days before it is required will be treated as a nunc pro tunc and charged accordingly

TO	THE MOST WORS	HIPFUL GRAND MAST	TER we, the undersigned, i	being the Master and Secretary of	
1.	LODGE NAME				
2.	NUMBER				
3.	PROVINCE/DISTRICT				
respectfully request on behalf of the members of the Lodge that a Dispensation be granted to enable				Dispensation be granted to enable	
4.	BROTHER	Initials & Surname			
5.	FORENAMES IN FU	JLL			
6.	DECORATIONS AND HONOURS			7. STYLE OR TITLE (e.g. Mr, Sir, Brigadier)	
8.	ADDRESS	(i)	(-191., -1., -1., -1.)		
		(ii)			
		(iii)			
		(iv)			
		(v)			
to	be Installed as Mas	ster of this Lodge,	(v	i) POSTCODE	
no	twithstanding that	contrary to the Consti	itutions and Regulations	(Please tick the appropriate box)	
(i) He has not previously served the office of Warden in a Lodge of Mark Master Masons for one complete year, that is from one Installation to the next.					
	(ii) He has not previously served the office, of Master of a regular Craft Lodge of Freemasons.				
	(iii) He is not a subscribing member of a regular Craft Lodge of Freemasons.				
	(iv) He is at present Master of Lodge No.and will still be occupying that office on the date of the Installation Meeting of this Lodge.(v) He has been re-elected to continue as Master of the Lodge for a third consecutive year.				
(vi) For reasons detailed overleaf.					
we are pleased to confirm that Brother					
		(Initials & Surname)			
1	was regularly elec	ted as Master for the c	ensuing year ON	ſ	
and it is considered that it will be in the best interest of the Lodge and for the good of the Order generally if he is Installed as Master $$\operatorname{ON}$$					
Ι	NAME OF SECRETA	ARY (Initials & Surname)			
SIGNATURE OF SECRETARY			DATE		
]	NAME OF MASTER	(Initials & Surname)			
SIGNATURE OF MASTER				DATE	
]	RECOMMENDED B	Y (Initials & Surname)			
SIGNATURE OF PROVINCIAL/ DISTRICT GRAND MASTER DATE				DATE	
9.	CHEQUE BACS (Please tick as appropria	PAYMENT OF tel If paying by BAO	DATE BACS PAID CS you <u>MUST</u> enclose receipt	BACS REF. of payment with this form	
	This form should			days before the date of Installation and	

MUST be recommended by the Provincial/District Grand Master when applicable.

Invoice

NPT

Dispensation No.

Office use

Date received



ANY ADDITIONAL COMMENTS