Grand Conclave of the Order of the Secret Monitor, or Brotherhood of David and Jonathan, in the British Isles and in Territories Overseas

## REQUEST FOR DISPENSATION IN RESPECT OF A CONCLAVE

To be Completed by the Supreme Ruler and Secretary

This form must be completed using typescript or block letters and sent via the Provincial / District Grand Recorder to: The Grand Recorder, Mark Masons' Hall, 86 St. James's Street, London SW1A 1PL

TO THE MOST WORTHY GRAND SUPREME RULER		
we, the undersigned, being the Supreme Ruler and Secretary of  1. CONCLAVE		
2. NUMBER		
3. DIVISION		
respectfully request on behalf of the members of the Conclave that a Dispensation be granted for the following reason(s)		
(i) To enable a meeting of the Conclave to be held on (Which is not a regular meeting date as detailed in the bylaws)		
(ii) To enable a meeting of the Conclave to be held at the following place.		
(Which is not the venue detailed in the bylaws)		
(iii) The Warrant of the Conclave not being available, for the reasons detailed overleaf, the members desire to hold a meeting of the Conclave without the Warrant.		
(iv) For reasons detailed overleaf.		
NAME OF SECRETARY (Initials & Surname)		
SIGNATURE OF SECRETARY		
NAME OF SUPREME RULER (Initials & Surname)		
SIGNATURE OF SUPREME RULER		
RECOMMENDED BY (Initials & Surname)		
SIGNATURE OF PROVINCIAL / DISTRICT GRAND SUPREME RULER  DATE		
NOTES  1. This petition must reach the Grand Recorder with the appropriate fee at least three weeks before the date of the meeting and MUST be recommended by the Provincial / District Grand Supreme Ruler when applicable.  2. A Dispensation, if granted, will be sent to the Provincial/District Grand Recorder.		
OFFICIAL USE ONLY  DISPENSATION No. FEE RECEIVED £ •		

ANY ADDITIONAL COMMENTS	
	CHANGE OF DETAILS
SECRETARY SECRETARY	espect of the below, please tick the appropriate box, and complete the details.  TREASURER
BEREITHET	TREASURER
Secretary / Treasurer (delete as neces	essary)
1. INITIALS AND SURNAME	
2. FORENAMES IN FULL	
2. FORDIVINIED IIVI CEE	A STALE OF TALE
3. DECORATIONS AND HONOURS	4. STYLE OR TITLE (e.g. Mr, Sir, Brigadier)
3. DECORATIONS AND HONOURS 5. ADDRESS (i)	(e.g. Mr, Sir, Brigadier)
3. DECORATIONS AND HONOURS	(e.g. Mr, Sir, Brigadier)
3. DECORATIONS AND HONOURS  5. ADDRESS  (i)  (ii)  (iii)  (iv)	(e.g. Mr, Sir, Brigadier)
3. DECORATIONS AND HONOURS  5. ADDRESS  (i)  (ii)  (iii)	(e.g. Mr, Sir, Brigadier)
3. DECORATIONS AND HONOURS  5. ADDRESS  (i)  (ii)  (iii)  (iv)	(e.g. Mr, Sir, Brigadier)
3. DECORATIONS AND HONOURS  5. ADDRESS  (i)  (ii)  (iii)  (iv)  (v)	(e.g. Mr, Sir, Brigadier)
3. DECORATIONS AND HONOURS  5. ADDRESS  (i)  (ii)  (iii)  (iv)  (v)  6. DATE OF BIRTH	(e.g. Mr, Sir, Brigadier)  DAY MONTH YEAR  (vi) POSTCODE