

**PROOF OF DEATH KNIGHTS
TEMPLAR BURIAL FUND**

FOR
SUBORDINATE COMMANDERIES UNDER THE PROTECTION OF THE
UNION GRAND COMMANDERY NO. 22 OF FLORIDA INC. PHA

All applications blanks must be supplied from the Grand Commandery Office. No other will be
accepted. (please block print or type)

DATE: _____

MEMBER NAME: _____

AMOUNT OF BRF BENEFIT: \$200.00

BENEFICIARY:

NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____

COMMANDERY NAME: _____ **NO.** _____

I hereby certify that Sir Knight _____

is a member of _____ Commandery No. _____

in _____ Florida, that he died on the _____ day of the month of _____

in the year _____ in City: _____, State: _____.

Highest Title in Knights Templar _____

Eminent Commander:

NAME: _____

ADDRESS: _____ **CITY:** _____ **PHONE:** _____

Recorder:

NAME: _____

ADDRESS: _____ **CITY:** _____ **PHONE:** _____

Witnesses:

Generalissimo: _____

Captain General: _____

SEAL