

**Collection Report - Minnesota Masonic
Foundation Assessment and Payment to
the George Washington Masonic National
Memorial Association Fund**

Lodge Number
Located at _____ **Minnesota**

To: Grand Secretary
Grand Lodge of Minnesota
11501 Masonic Home Drive
Bloomington, MN 55437-3699

Date of Report _____

I am herewith transmitting to you all money collected by
me during the preceding month:

Secretary
Signature _____

Remittance for Minnesota Masonic Foundation, Inc. \$ _____

Remittance for GWMNM Fund \$ _____

By Affili- or Restor.	By Degrees	Lodge Registry #	Name of New Member			Complete Address	Raised MMDDYY	Joined MMDDYY	Jurisdiction Joined From	GWMNM Assessment \$5.00	Mas. Found. Assessment \$12.50
			Last Name,	First	M.I.						
			Spouse:								
			Spouse:								
			Spouse:								
			Spouse:								
			Spouse:								
			Spouse:								
			Spouse:								
			Spouse:								
			Spouse:								

Any other information to note:

Total Paid This Sheet \$