

MASONIC CHARITY FOUNDATION OF NEW MEXICO
P.O. Box 25004 Albuquerque, New Mexico 87125-0004
505 – 243 – 4931

COMPLETION FORM

Please **FILL OUT** this form **IMMEDIATELY** after the **PRESENTATION** of
the **MASONIC CHARITY FOUNDATION Contribution** added to
the **LODGE, CHAPTER or COURT Contribution!**

Report of LODGE, CHAPTER or COURT _____, # _____,
(NAME)

(TOWN / CITY)

This is to certify that the LODGE, CHAPTER or COURT Contribution of
\$ _____ added to the MASONIC CHARITY FOUNDATION Contribution of
\$ _____ **totaling a Contribution of \$ _____** was presented to

(RECIPIENT)
on the _____ day of _____, 20_____.

Comments: _____

(Enclose any newspaper articles, flyers, fundraising tickets, pictures, etc. that show the
Lodge, Chapter or Court involvement in the **FUND RAISER.**)

Secretary: _____
SIGNATURE PRINT

Phone (c h): _____
CIRCLE ONE XXX -- XXX -- XXXX