## **LP&A4** United Grand Lodge of England **INSTALLATION RETURN**

of Master, and Return of Wardens and of Past Masters of Lodges under the English Constitution, being Subscribing Members

mee	ting at										
	claim a right to sit and vote in onstitutions.	the Unite	ed Grand	d Lodge, pursuant to R	ules 9 aı -	nd 1	51, of the	Book			
SECF	E MADE <b>IMMEDIATELY</b> AFTER T RETARY, FREEMASONS' HALL, ( I <b>E ABSENCE OF THIS RETURN,</b> I	30 GREAT	QUEEN S	TREET, LONDON, WC2B	5AZ.						
DE	TAILS OF MASTER'S QUALIFI	CATION N	IUST BE	GIVEN:-							
eith	ner Served as Master of Lodge	No	ir	n the year							
or	as Warden for <b>FULL</b> Year in	Lodge No		in the year	_						
or date of Dispensation issued under Rule 109, Book of Constitutions											
	Surname	Chr	istian or F	Forenames (in Full)	Data of M	Mooto	er's Installat	ion:			
W.M.					Date of 1	MM	er s iristaliai	200			
S.W.					Date of I	nvest MM	titure of Wa	rdens:- 200			
J.W.					DD	MM		200			
	If either of the Wardens were not in for the date. The Grand Secretary										
	Names of qualified Subscribin										
	N.B. Only P.M.'s of Lodges unde Honorary Members must not be				ficers, to	be e	entered.				
	Name and Initials	Lodge Nos.	Years	Name and Initials	<b>.</b>		Lodge Nos.	Years			
	(BLOCK LETTERS)	served as Master	when installed	(BLOCK LETTERS)			served as Master	when installed			

Lodge No. \_\_\_\_\_

<b>Subscribing Past Masters (continue</b>	d)				
Name and Initials (BLOCK LETTERS)	Lodge Nos. in which served as Master	Years when installed	Name and Initials (BLOCK LETTERS)	Lodge Nos. in which served as Master	Years when installed
	ividotei			IVIGSICI	
Almoner's Name (BLOCK LETTERS)					
` _					
Address					
	Postcod	e	Telephone No		
Charity Steward's Name (BLOCK LET	TERS)				
Address					
We, the undersigned, declare that t Master, the Investiture of the Warder	ns, and of the F	Past Masters	s of and in the Lodge who are		
Lodge in accordance with the provis	sions of Rule s	on the boo	k of Constitutions.		
Signature of Master					
Address					
Dated this day of					
Signature of Secretary				N.B. Please tick both there is any alteration	
Name (BLOCK LETTERS)				name and/or addres	ss of
Address					
Postcode	_ releptione N	NU			