PETITION FOR DEGREES

mullin

City: TO THE MOST WORSHIPFUL MASTER:	Oregon Idaho Montana	Month: Year:
Lodge	No	F.& A. M.

WORKING UNDER A REGULAR, UNFORFEITED WARRANT FROM THE M. W. PRINCE HALL GRAND LODGE, F. & A. M. OF OREGON, IDAHO, & MONTANA INC.

The Petitioner, unbiased by improper solicitation of friends, influenced by mercenary, or unworthy motives, and prompted by a favorable opinion and a desire for knowledge of the Ancient and Honorable Institution, freely and voluntarily offer himself a candidate for the Mysteries of Freemasonry, and respectfully petitions for initiation and Membership in your Lodge.

Name in full:				Age:	
Born in:	on	the	day of		
Occupation:		Place of Bus	iness:		
Residence:		In this State	years,	In City	years.

and if, the prayer of the petitioner is granted, he promises a cheerful conformity to the Ancient Usages and established customs of the Order, and upon his honor, as a man has made true answers to the' following questions.

1.	Do you believe in a Supreme Being?		10.	Are you living solely with your
2.	Are you a proprietor, keeper, or inmate of a house of prostitution or gambling resort, or engage in illicit sate of liquors?		11.	Are you supporting your wife?
3.	Are you addicted to use of intoxicating liquors or drugs of any kind?		12.	Will you show us your marriage
4.	Are you indicted for any offense?		13.	Have you ever petitioned any other lodge?
5.	Were you ever convicted of a felony?		14.	Are you a member of any secret
6.	Have you free and perfect use of all members of your body?		15.	Were you persuaded by anyone?
7.	Are you afflicted with any of the following diseases: Consumption, Rheumatism, Bright's disease, Heart, or venereal disease?		16.	What induced you to make application for membership?
8.	Are you in sound bodily health?		17.	Are the foregoing statements made solely by you?
9.	Are you married?		_	
	Date at		this	day of
	Name in full			
	RECOMMENDED BY:	Give name	of wife	e or next near relative:
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MEDICAL	EXAMIN	ATION
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Name:			Age:
Residence:			
Business:		At:	
EXAMINATION	OF APPLICANT		
This is to certify t	hat I have examined Mr.		and find the following:
Temn	Pulse		Is it irregular?

Temp. Pulse	Is it irregular?
Is respiration steady, full, free and distinct in	ı both lungs?
Any evidence of pulmonary disease? Any indication of any disease of the brain?	or heart disease?
Any indication of any disease of the brain?	
Have you examined the urine?	Is it free from Albumin?
From Sugar? What tests u	sed?
From Sugar? What tests u Do you find applicant's condition as stated in	n his answers?
Do you find any conditions of disability as st	ated in his answers?
Do you find evidence of Syphilis?	Cancer?
Is applicant addicted to use of stimulant or o	
Do you honestly consider the applicant to be a livelihood?	in good health and able to earn
Do you unreservedly recommend him to me	mbership in the Order?
	M.D.
	M.D.
PETITION F	MD
PETITION F M	M.D.
PETITION F M	M.D.
PETITION F M Received at stated Lodge meeting held Action had at stated Lodge meeting held	M.D.
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PETITION F M Received at stated Lodge meeting held Action had at stated Lodge meeting held Committee: Committee reported and petitioner	M.D. OR DEGREES
PETITION F M Received at stated Lodge meeting held Action had at stated Lodge meeting held Committee: Committee reported and petitioner	M.D.
PETITION F M Received at stated Lodge meeting held Action had at stated Lodge meeting held Committee: Committee reported and petitioner Balloted	M.D. OR DEGREES
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praying to become a member of this Lodge, wish to report that they have made the necessary inquiries about his habits, moral character and standing, and report Mr. The undersigned, your committee to whom was referred the petition of Mr.

Date

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