

TRANSFER REQUEST CERTIFICATE

SPJST

(To be completed by each member requesting transfer, then mailed to SPJST, P O Box 100, Temple, TX 76503).

I, _____, the undersigned, and member of SPJST Lodge
No. _____ do hereby request a transfer of my certificate (membership) from the above
Lodge to Lodge No. _____ as provided for in the By-Laws of the SPJST. My date of
birth is _____ and my present address is _____
Street, P O Box or RT. City

State Zip Code . My telephone number is _____
AC and Number

Member's signature (or that of parent or
guardian if member is under 16)

(The following is to be completed by the Financial Secretary's Department at the Home Office).

Certificate(s) _____, _____, _____

WITNESS:

_____ **Lodge Officer**

_____ **Lodge Officer**

Dated: _____