



THE SRI LANKA PLANTERS' BENEVOLENT FUND

Trustee: The Planters' Association of Ceylon (Inc.)

32, Vajira Road, P.O.Box 855, Colombo 05.

Telephone: 011 2587013, 0112592683 Facsimile: 011 2502265

Email: pack@eureka.lk

APPLICATION FOR ASSISTANCE

1. Name in Full : (Block Letters)	
2. Contact No: 2.1 Mobile : 2.2 Office :	
3. Membership Registration No :	
4. Present Address :	
5. Date of Birth : 5.1 Place of Birth : Please attach a copy of Birth Certificate	
6. Nationality :	
7. In what capacity are you making this application? Estate or office executive, wife or child of such executive.	

8. If claim is in respect of the spouse, please provide details of Name, DOB & nationality of spouse & attach original marriage certificate	
9. Have you any children? 9.1 If so, give names, sex and dates of birth.	
10. Are you at present employed? 10.1 If so, in what capacity?	
11. If unemployed, state briefly how you came to be out of employment.	
12. If a planting or office executive, in what planting district were you last employed?	
13. In what planting district are you best known?	
14. If you are a retired planting or office executive, state date of retirement.	

<p>15. Have you ever subscribed to this fund?</p> <p>15.1 If so, give dates and amounts.</p>	
<p>16. Have you applied to any charitable organization?</p> <p>16.1 If so, what was the result?</p>	
<p>17. Have you any means at all? If so, give full details.</p> <p>17.1 From interest on Fixed Deposit etc.</p> <p>17.2 From dividends on stocks & shares etc.</p> <p>17.3 From friends and relatives.</p> <p>17.4 From other charitable organization.</p> <p>17.5 From other sources.</p>	
<p>18. What is your present accommodation?</p> <p>18.1 What rent do you pay?</p>	
<p>19. Are you an income tax payer?</p> <p>19.1 If so, what is your tax file no?</p>	
<p>20. Exactly what assistance do you seek from the fund?</p>	

<p>21. How long have you been in distress?</p>	
<p>22. Names & addresses of two persons who you think will support your application and who are, or have been members of the fund.</p>	
<p>23. Any other facts you may consider worth mentioning.</p>	

I hereby certify that the foregoing information is correct.

Date

Signature of Applicant

REMARKS BY SUPPORTERS

REMARKS BY THE SECRETARY

REMARKS BY STANDING COMMITTEE

RESULT OF APPLICATION

THE SRI LANKA PLANTERS' BENEVOLENT FUND

Name :

Date of Birth :

Address :

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ANNUAL INCOME

From employment or for services :

From interest on Fixed Deposits etc :

From dividends on Stocks and Shares etc :

From friends, relatives, etc :

From any other charitable organization :

From all other sources :

From rent for premises rented or leased :

From agriculture or home gardening :

From other items of business :

ANNUAL EXPENDITURE

To rent paid for accommodation :

To medical expenses :

To clothing :

To food :

To education :

To travelling :

Date :

Signature of Applicant :