My full name is
Address:
Present occupation:
Occupation before loss of sight:
If pension granted, payment is desired at post-office at
Full name, occupation, and address of person (if any)
desired to collect pension on my behalf:
Date of birth:
Place of birth:
If naturalized, give date and place of naturalization in New Zealand, and produce naturalization papers:—
Date of naturalization: Place of naturalization:
State if single, widowed, or married:
If married, full name of husband [wife]:
Date of arrival in New Zealand:
Port of arival: Name of ship:
If absent from New Zealand since arrival, state period:
State reason for absence:
During the last ten years I have resided in the following towns or districts in New Zealand :—

Town or District.		al Years of sidence.	Name and Address of Person who can verify Residence.
	19	to 19 to 19	
	19	to 19	
	<u></u>		

Date of loss of vision:

Place of loss of vision:

Condition of left eye:

Cause of loss of vision : Condition of right eye :

Name and address of eye-specialist whom you have con-

sulted:

What is last advice you received from specialist?

[Note.—Submit any medical evidence you have in regard to your loss of sight.]

Name and address of well-known person (not a relative) who knows my circumstances:

The income of myself and my husband (wife) during the past twelve months was as follows:—

Nature of Income.	Re- ceived by Me.	Re- ceived by Hus- band [Wife].
<ol> <li>Salary, wages, or other earnings (present weekly rate, £ )</li> <li>Profits from business of [State class of business]</li> <li>Superannuation or other class of pension (annual amount)</li> <li>Annuity from life-insurance company or other source (annual amount)</li> <li>Allowance from relatives, Hospital Board, or other society or person</li> <li>Estimated value of free board and lodging provided</li> <li>Money derived from rent of property</li> <li>Money derived from sale of milk, eggs, honey, grain, or other produce</li> <li>Interest from money lent or on mortgage, in bank, or other institution</li> <li>Dividends from shares, debentures, war loans, or other investment</li> <li>Money left by will or from deceased estate</li> <li>Money from life-insurance company (loan or surrender value, bonus, or sum assured)</li> <li>Money received as compensation for accident or other cause</li> <li>Money obtained from fire insurance or by</li> </ol>	£	£

Names	and addre	esses (	of person	s from	who	$\mathbf{m} \mathbf{t}$	he a	bove	amo	unta
were	received	[If a	mounts	under	11,	12,	13,	and	14,	give
date	received	:								_

Item Item

Item

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Do you anticipate receiving any money during the next twelve months? (Give particulars)

Number of children of applicant under fourteen, ; between fourteen and twenty-one, ; over twenty-

Particulars relating to relatives of applicant still alive over the age of twenty-one years—namely, father, mother, grandparents, brothers, sisters, sons, and daughters:—

Full Name.	Rela- tionship	Single (S), Widowed (W), or Married (M).	Occupa- tion.	Weekly Income.	Weekly Contribution to support Applicant,	If living with Applicant, show "Yes." If not, give Address.
				£		

Interests in land and house property owned in New Zealand or elsewhere by me and by my husband [wife]:—

	Description,	Governm ti	If used as Home,	
	including Section No. and Locality.	In my Name.	In Name of Husband [Wife].	
Freehold, lease- hold, life, or other interest			£	

(Particulars of Native land to be filled in on Form 3.) The above property is mortgaged for  $\mathfrak t$  to [Give full name, address, and occupation of mortgagee]:

Money owned in New Zealand or elsewhere by me and by my husband [wife] :-

	In m	y Name.	In Name of Husband [Wife].		
In ·	Amount.	Where Account kept, and No. of Pass-book.	Amount.	Where Account kept, and No. of Pass-book.	
Post - office Savingsbank Bank of New Zealand Bank of New South Wales Bank of Australasia Union Bank of Australia National Bank of N.Z. Commercial Bank Any other institution Any building society	£		£		

Value of other property owned in New Zealand or elsewhere by me and by my husband [wife] :-

Description.	Owned by Me. Value.	
Cash in hand	£	£

State the rate of interest received from any money invested: per cent.
Particulars of bill of sale or mortgage on any of this property

are as follows:

The following property, owned by me or by my husband [wife] has been transferred or sold during the past twelve months:—

Description.	Name and Address of Person to whom transferred.	Date of Transfer.	Consideration received for Transfer
Freehold or leasehold Cash or money on mortgage Stock or shares Interest in business Any other property			