

\_\_\_\_\_  
Unit/Committee/Shrine Club

E.I.N. \_\_\_\_\_

Medinah Temple A.A.O.N.M.S.  
550 N. Shriners Drive  
Addison, IL 60101

This will constitute your authorization to include the gross income, receipts, disbursements, and any other information relating thereto of

\_\_\_\_\_  
Unit/Committee/Shrine Club

in the group return (Form 990) for the year 2018 to be filed by Medinah Temple.

I hereby declare under the penalties of perjury that this authorization (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is true, correct, and complete and made in good faith.

Signed \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_