

# AUTHORIZATION FORM

E.I.N. \_\_\_\_\_ (Clubs ONLY)

Medinah Shriners  
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 2019 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.

\_\_\_\_\_  
Signature of officer Preparing Form

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Chairman of Audit Committee

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number