STATE OF COUNTY OF	) ) ss )
	AFFIDAVIT OF UNDERSTANDING
I ( <mark>Name</mark> ), Admii	nistrator of (Name of Lodge and number), state as follows:
1. ( <mark>Nam</mark>	e of Lodge) will be having a New Year's Eve party on December 31, 20
	ne Chief Compliance Office policy, I understand and agree to abide by the wing rules for said party:
B C	<ul> <li>All servers at the party must be TIPS trained</li> <li>There must be designated driver(s) available</li> <li>There will be no open bar / unlimited alcohol</li> <li>There will be no extension of Social Quarters hours beyond legal allowed hours.</li> </ul>
President	Administrator
Print	Print

Affix Corporate Seal Here