

Improved Benevolent and Protective Order of Elks of the World

Office of
RICHARD H. DENNIS
Grand Secretary
P. O. Box 159
Winton, NC 27986



Greetings:

In keeping with Article XV, Sections 3 and 3A pages 28-29 of the Grand Lodge Constitution and By-laws of the Grand and Subordinate Lodges, Temples and Auxiliaries. This form must be filled out and signed by the following officers of your Lodge and returned to the office of the Grand Secretary by the 15th of EVERY QUARTER.

Approved:
Atty. Leonard J. Polk, Jr., Grand Exalted Ruler

Fraternally,
Richard H. Dennis, Grand Secretary

**INSURANCE VERIFICATION QUESTIONNAIRE
(Liquor Liability)**

1. Name & Number of Lodge _____

Address _____ City _____ State _____ Zip _____

2. Insurance Company _____

Address _____ City _____ State _____ Zip _____

Policy # _____ Phone# () _____

Premium _____ Date/Proof of Payment _____
(yearly, monthly, quarterly)

3. Hold Harmless/Indemnification Clause: Yes _____ No _____

We the undersigned officers certify that the above report is correct:

Exalted Ruler
Secretary
Chairman of Trustee Board
District Deputy

Attached to this form must be a copy of the declaration page from your liquor liability policy showing the effective date to the expiration date, the amount of coverage and the Grand Lodge must be an additional insured.