

EVENT PERMIT



Ordinance 17-08

GIGIFIT ACCEPTANCE CHALLENGE

PERMIT NUMBER: TMP2022-00097

Date(s) of Event: April 23, 2022

Property Owner:

LEE COUNTY

Applicant:

PAM GARRETT 239-703-7960

Description:

5K run 1 mile walk, children's games, food vendors, t-shirt sales, music at Estero

Recreation Park on April 23, 2022 from 9:00AM until 2:00PM

Location of event:

9200 CORKSCREW PALMS BLVD, ESTERO, FL 33928

Estero Community Park

Will the event be attended by 1000 or more people? No

Will the event be held on County Owned Property? Yes

Will there be alcohol consumed or sold at the event? No

Will a bond be posted for this event?

Permit Conditions:

- * Applicant must meet all event application requirements, including requirements of the sign-off agencies.
- * The premises is to be left in the same condition as it was prior to the event.
- * The permit is to be readily available for inspection during the entire event.
- * If this approval includes the sale or consumption of alcoholic beverages, no alcoholic beverages may be consumed 1 1/2 hours prior to the conclusion of the event and vacating the facility/property.

Board of County Commissioners Lee County, Florida

County Manager Date

ftmpprmt specialevent.rpt



Event Application

Special Event

Use of County Property Alcohol within Lee County Facilities

Film, Video & Photography

Gigifit Acceptance Challenge

TIMP2000-00097



Event Application

Check the appropriate box(es) below:

- SPECIAL EVENT PERMIT
- □ USE OF COUNTY PROPERTY PERMIT
- PERMIT TO SELL AND CONSUME ALCHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
- FILM PERMIT

Section I - GENERAL INF	ORMATION (All Permit Types)
Title of Event / Name of Production	GiGiFit Acceptance Challenge
Date(s) of Event / Production:	April 23, 2022
Location(s) of Event:	Etero Parks and Recreation Center 9200 Corkscrew Palms Blyd. Estero, Florida
Name of Applicant:	GiGi's Playhouse Fort Myers Hanover Inscerance Compa
Applicant Address:	GiGi's Playhouse Fort Myers 1901 Brantley Road Unit 11 Fort Myers, FL 33907
Applicant Phone Number:	239-703-7960
Contact Person: (If different from applicant)	Pam Garrett
Contact Phone Number: (If different from applicant)	239-703-7960
Email Address:	pgarrett@gigisplayhouse.org
Estimated Attendance:	125-150
Event Description: Include each activity, when activities take place, etc.	5K fun run, 1 mile walk, short dash races, children's games (relay races, ring toss, parachute, hula hoops, face painting), food vendors, t-shirt sales, and music. Inflatable children's play station. We will also have a 50/50 raffle with ticket sales. The race/walk will take place first, then the children's games will take place.
Hours of Operation:	9:00am to 2:00pm
STRAP # of Parcel:	Park 34-46-25-E4-01WC.017A
Owner of Premises*:	Lee County Government

^{*}Notarized statement from the property owner specifically consenting to the proposed use required.



Fill out the following questions for all permit types:

and the same years and a same same same same same same same sa	anparane types.	
What is the Zoning Classification of the	e premises? Park	
Are any temporary structures to be ins	talled for the event? 🔀 Yes 🦵 No	Түре:
Do you have the appropriate permits for	or the temporary structures?	Γ Yes
* For a 'Special Event' and 'Use of Cou indentified, including all parking areas.	nty Property' permit, submit a site plan w	rith all proposed facilities and activities
Insurance Company Insuring the Event	: GiGi's Playhouse National Office	
Note: Certificate of Insurance must be submitt	ed at time of application	
Surety Company Bonding this Event (N	ame and Address): N/A	
Will Vehicles be Used as Part of This Event?	Will Food be Available at this Event?	Will Alcoholic Beverages be served/consumed at this Event?
┌ Yes	▼ Yes	r Yes
If yes, automobile coverage must be included on the certificate of insurance.	If yes, products liability coverage must be included on the certificate of insurance.	If yes, liquor liability coverage must be included on the certificate of insurance.
Name & Address of Organization Providing Food:		
Type of Food being Served: pizza, hot o	dogs, hamburgers, fries, Ice cream and soft d	rinks
Section II - USE OF COUNTY P	PROPERTY PERMIT	
Organization Sponsoring the Event:	iGi's Playhouse Fort Myers	
	r Sollcitation in the County Rights-of-Wa	у;
Name of Charity: N/A		
Address of Charity:		
Phone Number:		
Non-profit certificate/registration nun	nber:	
(Proof of registration with the Dept. of Agriculture 8	Consumer Services \$496.405 or proof the organization	is exempt from this requirement, 9316.2045)
Section III - SALE/CONSUMPT	TION OF ALCHOLIC BEVERAGES F	PERMIT
Is alcohol being sold/consumed on CoulfYes, then a "Lee County Alcohol Permit" is required	enty Property? . Only non-profit organizations can sell alcohol on Count	┌─Yes ┌─ No y Property.
Non-profit certificate/registration num (Required if alcohol is to be <u>SOLD</u> at the event)	nber:	
Please note: A permit from the State of Florida further details	Division of Alcoholic Beverages and Tobacco may	also be required; please call (239) 344-0885 for



Section IV - FILM / VIDEO / PHOTOGRAPHY PERMIT

TV Movie or Special	t apply); TV Series / Pilot	Г	TV Comme	rcial	Still Photos	\$
Public Service Announcement	「Industrial / Documentary	, Ė	Other:			
/ill any of the following be neede	d or included*?					•
Street Closure			┌ Yes	I⊠	No	
Traffic / Crowd Cont	rol		Yes	ΙX		
Fire or Burning	•		Yes	X		
Explosives or Pyrote	chnics		Yes	×		
Animals, Large or Sn	nall		Yes	×		
Construction of Any	Kind		Yes	ΙX		
Large and/or Nume	rous Vehicles	•	Yes	IX	•	
Helicopters, Boats, 6	etc.		「 Yes	×		
Stunts	•		Yes	X	No	
Other			Yes	X	No	
Special Parking Requirements:						ng Allia Alla . The garage construction and
City or County Services Required	i: (Personnel, equipment, faci	lities, e	tc.)			
, The following information is req	uired for local and state record not available, please estimate				to track the eco	nomic impact
the industry. If exact figures are						
Number In Cast:	Number in Crew:	·	Nun	ber of	locals hired:	
	Number in Crew: Estimate amount s	pent in I		iber of	locals hired:	
Number In Cast: Total budget:				iber of	locals hired:	
Number In Cast:	Estimate amount s Number of shootin	g days:		iber of	locals hired:	

Applicant Agreement - Signature Required



SECTION I - SAFETY

The Applicant agrees to provide adequate traffic and crowd control, emergency medical services and any other items, at the Applicant's expense, required by Lee County to protect the health, safety and welfare of the public. Lee County shall have the power to review the proposal and require, as necessary, detailed plans, diagrams, and explanations to clearly outline to Lee County, exactly what the Applicant is proposing.

SECTION II - INSURANCE

The Applicant, at its sole expense, agrees to procure and maintain in force during the entire term of the application, liability insurance in the amounts determined by Lee County Risk Management to protect against damages or other claims arising from use of County property by the applicant or its guests. Other limits may also be established by Lee County Risk Management for events which will be serving or consuming alcoholic beverages at approved County property. The insurance policy must also include coverage for Applicant's contingent liability on damages, claims or losses. "Lee County Board of County Commissioners" must be named as "additional insured" on the Certificate of Insurance, and the Certificate must be delivered to Lee County prior to Applicant's use of the property. The Insurance may not be canceled during the term of the event, if this occurs, the County has the right to revoke approvals related to use of the County property for the event, without recourse by the applicant.

SECTION III - INDEMNIFICATION

The Applicant agrees to indemnify, release and save harmless Lee County against any and all claims, costs, demands, damages, judgments or injuries of any nature arising from the conduct or management of, or from any work or thing whatsoever done in or about said Lee County property or any building or structure appurtenant thereto or equipment thereof during the term of this Permit, or arising during such term from any act of negligence of the Applicant, Applicant's agents, contractors, or employees, or arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or to any property of any person, persons, corporation or corporations, occurring during the term of this agreement on, in, or about said Lee County property, and from and against all costs, attorney's fees, expenses and liabilities occurring in connection with any such claim or any action or proceeding brought thereon.

For film permit applicants: The permittee shall have on-site a responsible representative empowered with authority over the filming director, filming crews, participants and filming operation. Permittee shall indemnify, defend and hold harmless the county, its officers, agents and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the permittee, and resulting or occurring from any negligent act, omission or error of permittee, resulting in or relating to injuries to body, life, limb or property sustained in, about or upon the permitted permises or improvement thereto, or arising from the use of the premises.

SECTION IV - DELIVERY, ACCEPTANCE AND SURRENDER OF PREMISES

The Applicant agrees to accept the County property on possession as being in a satisfactory state of repair and in sanitary condition.

The Applicant must surrender the premises to Lee County in the same condition as when Applicant takes possession, allowing for reasonable use and wear, and damage by acts of God. Applicant agrees to remove all business signs or symbols placed on the premises by the Applicant before redelivery of the premises to Lee County, and restore the premises to the condition in which it existed before their placement. Any signs and markings created or used in connection with this event must be temporary and removable; painting roadways, trees or any other fixed object is strictly prohibited. Applicant agrees to clear the Lee County property of litter at the close of the event.



SECTION V - AGREEMENT

The Applicant agrees that Lee County can, at its sole discretion, terminate and cancel its permit to use Lee County property at any time without prejudice. Applicant further agrees to waive, release, save and hold harmless Lee County from any and all claims, demands or cause of actions based upon Lee County's cancellation or termination of said permit.

The Applicant agrees that the Lee County permit does not provide Applicant with any property rights in the County property in question or in the permit itself.

The applicant does acknowledge and hereby affirms that any and all information is accurate to the best of his/her knowledge.

Print Name of Applicant and Titles

Print Name of Applicant and Titles

Correct Solutions

Date 318 22

Date



LEE COUNTY SHERIFF'S DEPARTMENT 14750 SIX MILE CYPRESS PARKWAY FORT MYERS,FLORIDA33912 (239) 477-1199

Check the appropriate box(es) below:

J SPECIAL EV	ENT PERMIT
∇ USE OF CO	UNTY PROPERTY PERMIT
F PERMIT TO	SELL AND CONSUME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERM	нт
	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATIO ICANT TO COMPLY WITH FOR THEIR EVENT.
Parking:	Parking in authorized areas only. Roadways will not be impeded.
Deputies (How Many?):	None
Fee for Services:	Name -
Tec for survices.	None
Special Arrangements:	Race is to remain along the pathways and walkways within the confines of the park. Any amplified sounds must adhere to the Lee County Noise Ordinance.
	Print Name: Captain S. Brady
	Signature: Capt Steven Brooky
	Title: Special Events, Permits and Details
	Date: 3/22/22
10 1 • 10 10 10 10 10 10 10 10 10 10 10 10 10	Page S



FIRE DEPARTMENT

The Fire Department serving the area where the event is to be held signs this form.

Please see User's Guide for contact information and Fire District Map.

Check the appropri	VENT PERMIT DUNTY PROPERTY PERMIT
AFTER REVIEWING THE A WILL REQUIRE THE APPL	APPLICATION, PLEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION ICANT TO COMPLY WITH FOR THEIR EVENT.
Fire Guards (How Many?)	N/A
Fee for Services:	N/A
Flammable Vegetation:	N/A
First Aid Equipment:	Call 911 for Emergencies
Fire Extinguishing:	Call 911 for Emergencies
Special Arrangements:	GiGiFit Acceptance Challange
	Print Name: Scott Danielson Signature: Lt. Fire Prevention Date: 3/31/22



Lee County Event Parmit Annill Eulon

EMERGENCY MEDICAL SERVICES / PUBLIC SAFETY 2000 Main St., Suite #100 FORT MYERS, FL 33901 (239) 533-3911

Check the appropri	ate box(es) belov	N:
☐ SPECIAL EV ☐ USE OF CO ☐ FILM PERM	UNTY PROPERTY PI	ERMIT
AFTER REVIEWING THE WILL REQUIRE THE APPL	APPLICATION, PLE ICANT TO COMPLY	ASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION WITH FOR THEIR EVENT.
Treatment Facilities:	None necessary.	
Medical Personnel:	None necessary.	
Medical Supplies / Equipment:	None necessary.	
Safety Requirements:	Applicants shall follo concerning health ar congregating at the	ow all CDC and FDOH directives, and the Florida Governor's Executive Orders and safety, especially with regards to COVID-19 and the number of people event.
Fee for Services	Not applicable.	
Special Arrangements:	Please call 911 in the 239 533-3911.	e event of an emergency. To arrange special event coverage, contact our office at
	Print Name:	Douglas B. Higgins
	Signature:	Douglas B. Higgins
	Title:	Division Chief
	Date:	March 24, 2022



DEPARTMENT OF TRANSPORTATION 1500 MONROE STREET FORT MYERS,FL33901 (239) 533-8580

Check the appropri	ate box(es) bel	ow:		
☐ SPECIAL E\	ENT PERMIT			
∪SE OF CO	UNTY PROPERTY	PERMIT		
F PERMIT TO	SELL AND CONS	JME ALCOHOLIC BEV	ERAGES WITHIN LEE COUNT	Y FACILITIES
FILM PERN	ИT			
AFTER REVIEWING THE WILL REQUIRE THE APP			OW WHAT ARRANGEMENTS VENT.	S YOUR ORGANIZATION
Parking:	No event parking o	n Lee COunty maintaine	d road rights-of-way.	
Ingress and Egress:	Use all established	means of ingress and eg	ress.	
Special Arrangements:	None.			,
	Print Name:	Bryan Miller		_
	Signature:	Bryan Miller	Digitally signed by Bryan Miller Date: 2022.03.30 10:29:30 -04'00'	-
	Title:	Senior Project Manager		-
	Date:	March 30, 2022		_



LEE COUNTY PARKS AND RECREATION 3410 PALM BEACH BOULEVARD FORT MYERS,FLORIDA33916 (239) 533-7275

Check the appropri	ate box(es) bei	low:
J⊠, SPECIAL E\	/ENT PERMIT	
• •	UNTY PROPERTY	
• •		UME ALCOHOLIC BEVERAGES WITHIN LEE COUNTY FACILITIES
FILM PERN	AIT .	
		LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION PLY WITH FOR THEIR EVENT.
Illumination:	Event organizer w	ill need to provide additional lighting If needed.
0.15 4	All voblelos must u	se the designated parking areas within the parking lots of the park. No vehicles will
Parking Areas:	be permitted onto between the Rec C	the central lawn area. Organizers may drop off event supplies via the service road tenter and the Chiller area, but then must remove vehicles. For authorization to use at the commerce area off Corkscrew, contact Keith at Collier Association Management
Special Arrangements:	responsible to ordesigns are not perm	or any inflatable devices; must use water buckets/barrels or sand bags. Organizer is er and pay for dumpster and portable toilets as required by park staff. Banners or litted beyond Park boundaries. 6 am Outdoor Restrooms open 7 am - 9 pm at 9 am - 5 pm
	Contact Park Supe	rvlsor at 239-533-1470
	Print Name:	Colleen Via
	Signature:	Colle Via
	Title:	Operations Manager
	Date:	3/30/22

Page |10

Estero - 6161 Fit Challenge 4) 3/22





LEE COUNTY RISK MANAGEMENT COUNTY ADMINISTRATION BUILDING - 4TH FLOOR 2115 SECOND STREET FORT MYERS,FLORIDA33901 (239) 533-2221

Check the appropriat	NT PERMIT NTY PROPERTY ELL AND CONSI	
AFTER REVIEWING THE A WILL REQUIRE THE APPLIC	PPLICATION, P CANT TO COMP	LEASE INDICATE BELOW WHAT ARRANGEMENTS YOUR ORGANIZATION LY WITH FOR THEIR EVENT.
Insurance Requirements:	occurrence to pro	eral liability insurance with minimum limits of One Million Dollars (\$1,000,000) per otect against bodily injury and/or property damage relative to applicants use of event within Lee County.
Special Arrangements:	A Certificate of In Board of County additional insure Subject to proof	
	Print Name:	Mike Figueroa
	Signature:	Mike from -
	Title:	Risk Program Manager
	Date:	March 29, 2022

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/00/YYYY) 3/25/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
CFM Insurance Agency, Inc.
50 N Brockway Street, Suite 5-2
Palatine, IL 60067

CONTACT Susan Tobin
NAME:
PHONE
(AC, No. Ext): (847) 934-0200 224
E-HADDRESS: SueT@cfmins.com

FAX (A/C, No): (847) 934-0200

INSURER A : HANOVER INSURANCE COMPANY

NAIC #

22292

INSURED

Gigi's Play House, Inc. 2350A W. Higgins Rd Hoffman Estates, IL 60169 INSURER B :

INSURER E :

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURANCE TYPE OF INSURANCE

ADDITIONAL THE POLICY POLICY FOR THE POLICY PAID CLAIMS.

INSURANCE TYPE OF INSURANCE

ADDITIONAL THE POLICY POLICY PROPERTY OF THE POLICY PAID CLAIMS.

E	CLU	JSIONS AND CONDI	TIONS OF SUCH		LIMITS SHOWN MAY HAVE I	BEEN REDUCED BY	PAID CLAIMS.		
INSR LTR		TYPE OF INSUR	RANCE	ADDL SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X .	COMMERCIAL GENER			•	0440000	2/1/2023	EACH OCCURRENCE \$ DAMAGE TO RENTED	1,000,000 1,000,000
		CLAIMS-MADE	X OCCUR	Х	ZDCD486792-04	2/1/2022	ZITIZVZO	PREMISES (Ea occurrence) . \$	10,000
								MED EXP (Any one person) \$	1,000,000
								PERSONAL & ADV INJURY \$	
	GEN	NL AGGREGATE LIMIT A	APPLIES PER:					GENERAL AGGREGATE \$	
	01.	POLICY PRO-	X LOC					PRODUCTS - COMPIOP AGG \$	3,000,000
								LIQUOR s	1,000,000
Α	AUT	OTHER: COMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$	1,000,000
ŀ	Х	OTUA YMA			AHCD478637	2/1/2022	2/1/2023	BODILY INJURY (Per person) \$	
		OWNED AUTOS ONLY	SCHEDULED AUTOS					BODILY INJURY (Per accident) \$	
		HIRED AUTOS ONLY	NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident) \$	
								<u> </u>	
Α	X	UMBRELLA LIAB	X occur					EACH OCCURRENCE S	3,000,000
	•	EXCESS LIAB	CLAIMS-MADE		UHCD486806-04	2/1/2022	2/1/2023	AGGREGATE \$	
1		DED X RETENTK	ns 0					\$	_
	WOR	RKERS COMPENSATION						PER OTH- STATUTE ER	
	ANY PROPRIETORIPARTNER/EXECUTIVE						E.L. EACH ACCIDENT \$		
	OFFI (Man	ICERMEMBER EXCLUDE	:0?	H I A				E.L. DISEASE - EA EMPLOYEE, \$	
	If ves	s, describe under CRIPTION OF OPERATI						E.L. DISEASE - POLICY LIMIT \$	
<u> </u>	000	CIGI HOLLOS OS ELVATS	O110 001011						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
EVENT: GIGI'S Playhouse Ft. Myers, LLC - April 23, 2022 @ Estero Park & Recreation Center - Lee County, a political subdivision and Charter County of the
State of florida, its agents, employees and public officials will be named as an additional insured on the General Liability policy, including Products and
Completed Operations coverage, as required by the Permit process and in accordance with policy provisions.

OK 03/29/2022

This foir-

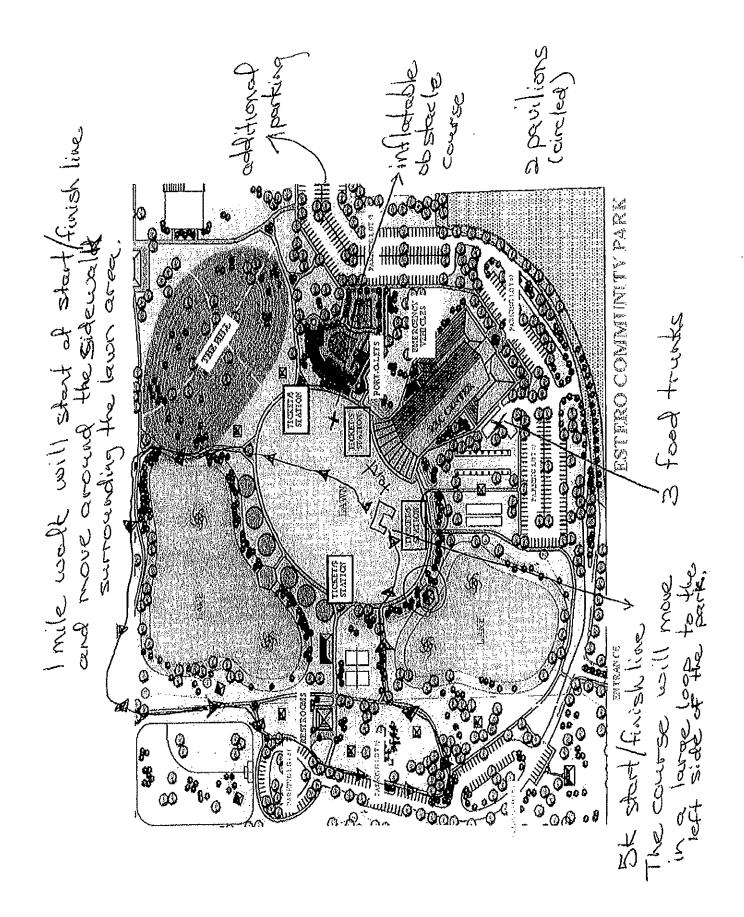
CERTIFICATE HOLDER

Lee County Board of County Commissioners PO Box 398 Fort Myers, FL 33902 CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

- Gram



AFFIDAVIT OF AUTHORIZATION

APPLICATION IS SIGNED BY INDIVIDUAL OWNER, APPLICANT, CORPORATION, LIMITED LIABILITY COMPANY (L.L.C.), LIMITED COMPANY (L.C.), PARTNERSHIP, LIMITED PARTNERSHIP, OR TRUSTEE

1. ha	rulee Tuck	(name) as Authorized Representative,
(owner/title	e) of Tillman Infrastructure, UC	(name), as Authorized Representative (company/property), swear or affirm under oath, that
I am the ov	wner or the authorized representative of the ow	vner(s) of the property and that:
2. 3.	the referenced property as a result of any ac application and the Land Development Code. All answers to the questions in this applicatio attached hereto and made a part of this appl. I have authorized the staff of Lee County Conormal working hours for the purpose of invesapplication; and that	on and any sketches, data or other supplementary matter lication are honest and true; mmunity Development to enter upon the property during estigating and evaluating the request made thru this ed, sold or subdivided unencumbered by the conditions
	The second and the second seco	
*Notes:		
	oplicant is a corporation, then it is usually execu	
• II trie app	pplicant is a Limited Liability Company (L.L.C.) of be signed by the Company's "Managing Memi	or Limited Company (L.C.)., then the documents should
	oplicant is a partnership, then typically a partner	
 If the app 	pplicant is a limited partnership, then the genera	al partner must sign and be identified as the "general
partner" (of the named partnership.	•
 If the app 	oplicant is a trustee, then they must include their	r title of "trustee."
 In each is 	instance, first determine the applicant's status,	e.g., individual, corporate, trust, partnership, estate, etc.,
and men	n use the appropriate format for that ownership.	•
the facts s	nalties of perjury, I declare that I have read stated in it are true. Signature	the foregoing Affidavit of Authorization and that 3/24/22
	Signature	- Date
		·
	ALL OTHER APPLICATION TY	ED FOR ADMINISTRATIVE APPROVALS************************************
		subscribed before me by means of physical
	or 🗌 online notarization, this 🕰 🗥 day of	
Keyle		person providing oath or affirmation), who is
	known to me or who has produced	(type of identification)
as identifica	\	- LON V
STAMP/SEAL	My Comm. Expires Jul 25, 2025	Signature of Notary Public
Web/Affidavite	Bonded through National Notary Assn. Boge 1	