INDEPENDENT ORDER OF VIKINGS AFFIDAVIT OF TRANSFER

This is certify (Name)			
(Address)	(City)	State)	(Zip)
Phone Number(s)			
Born onda	y of the month of	of the year	
Was admitted to (Lodge Name)	(Lodge Number)	I.O.V. the	day
of the month of	of the year		
Holder of Certificate Number			
It is further certified that benefit	assessments of \$	and National Dues of \$	
Has been paid to the	day of the month of	of the year	
Said member has requested tran	sfer to (Lodge Name)	(Lodge number) _	I.O.V
Attested: (Lodge)	(Lodge Numl	(Lodge Number)	
Dated this	day of the month	of the year	
	(Chief)		_ (Financial Secretary
	••••••		
(Lodge Name) (Lodge Number)		on the	day of the month o
of th	ne year		
Attest:	(Chief)		(Financial Secretary
•••••	•••••	•••••	•••••
Financial Secretary:			
(Name)	, Certificate Number		, was admitted
to	Lodge, Lodge Number	, the	day of the month
of	, of the year	, and is a member of said	d lodge from that day.
	,	Grand Secretary, Independ	dent Order of Vikings.