## Authorization for Pyrotechnics Display in a State Facility

This auth	orization is to con	duct a Pyrotechnics D	isplay before a proxin	nate audience to be
held between the	hours of	and	at:	
Name of Facility/				
Address:			-	
City, State, Zip			_	
On				

The Department of Financial Services hereby grants permission to							
of	whose address is	to conduct					
a							

## STATEMENT OF AFFIDAVIT

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