CERTIFICATION OF POST DELEGATES – ALTERNATES

DISTRICT:				POS1:					
		Che	ck this box	if your Post is n	ot sending any Deleg	gates	s to Convention		
DELECA	TE LAST NAME	DELEGATE FIRST N			RSHIP ID #			ATE EMAIL	
DELEGA	TE LAST NAME	DELEGATE FIRST N	AME	WENDE	KSHIP ID#		*DELEG	AIEEMAIL	
ALTERNA	ATE LAST NAME	ALTERNATE FIRST N	NAME	MEMBE:	RSHIP ID #		*ALTERN	NATE EMAIL	
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2022–2	2023 Post Comman	der Signature / Me	mber ID		2022–2023	3 Po	st Adjutant Signa	ture / Member	ID
*A valid contact Email Required to confirm receipt by Department.									
FOR DEPARTMENT USE ONLY									•
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	DISTRICT:	<u>: </u>					POST:		
		' [DELE	GATES:					