

## CERTIFICATION OF POST DELEGATES – ALTERNATES

**DISTRICT** \_\_\_\_\_

**POST** \_\_\_\_\_

DELEGATE'S LAST NAME

DELEGATE'S FIRST NAME

MEMBERSHIP ID #


ALTERNATE'S LAST NAME

ALTERNATES'S FIRST NAME

MEMBERSHIP ID #


\_\_\_\_\_  
2018–2019 Post Commander Signature / Member ID

\_\_\_\_\_  
2018–2019 Post Adjutant Signature / Member ID

FOR DEPARTMENT USE ONLY

<b>DISTRICT:</b>		<b>ALLOWED DELEGATES:</b>		<b>POST:</b>	
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