

AMERICAN LEGION AUXILIARY

PO Box 2760

Zanesville, Ohio 43702-2760

DISTRICT # \_\_\_\_\_ UNIT # \_\_\_\_\_ UNIT NAME \_\_\_\_\_

**2017 DEPARTMENT AND DISTRICT CONVENTION ALTERNATE CERTIFICATION FORM**

Delegates and Alternates are elected by each Unit to represent the Unit at Department and District Conventions. **Please complete this form and return one copy to Department Headquarters by June 1st (see address above) and one copy to your District President at least one week prior to District Convention.** Keep a copy for your records. **Do not** include Delegates-At-Large on this list. Please type or print.

MEMBER ID #	ALTERNATE NAME	ADDRESS	CITY	ST	ZIP	PHONE #
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						

I, \_\_\_\_\_, Unit President, certify that the above members are in good standing and are duly elected as Alternates to the 2017 American Legion Auxiliary, Department of Ohio, Department and District Conventions.