



# NARFE

National Association of Retired Federal Employees

## Federation Convention Delegate Credentials

**Federation (state):** \_\_\_\_\_

**Convention Location:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Chapter Number:** \_\_\_\_\_ **Date of Chapter Meeting:** \_\_\_\_\_

### To Credentials Committee:

1. Under the provisions of the Constitution and Bylaws of this Federation, this Chapter selected the following member as a delegate:

Name: \_\_\_\_\_

Address, city, state, and zip: \_\_\_\_\_

2. The following member was selected as an Alternate:

Name: \_\_\_\_\_

Address, city, state, and zip: \_\_\_\_\_

3. The following member was selected as Proxy Delegate to represent this chapter:

Name: \_\_\_\_\_

Address, city, state, and zip: \_\_\_\_\_

Name of Chapter Secretary: \_\_\_\_\_

Signature: \_\_\_\_\_

### Important:

Prepare and execute this form in triplicate for each Regular, Alternate, or Proxy Delegate. Deliver the original (white) copy to the Delegate, Alternate, or Proxy Delegate, and mail the duplicate (yellow) copy to the Federation Secretary. Keep the pink copy for chapter files.

The Delegate, Alternate, or Proxy Delegate must present his/her original copy of the Credentials when registering at the Convention.