



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.