

**DISTRICT CONVENTION  
DELEGATES AND ALTERNATES**

AUX. #: \_\_\_\_\_ MEMBERS: \_\_\_\_\_ DATE OF ELECTION: \_\_\_\_\_

**TO: DISTRICT CREDENTIALS CHAIRMAN**

(Insert Name and Address of Chairman)

**This is to certify that the Delegates and Alternates listed below have been duly elected to represent our Auxiliary at the District Convention**

\_\_\_\_\_ Auxiliary President

**DELEGATES**

**ALTERNATES**

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**NOTE: If additional space is needed you may either run a copy of this form or put names on an additional (blank) sheet of paper.**

\_\_\_\_\_  
Auxiliary President Signature

\_\_\_\_\_  
Auxiliary Secretary Signature