## **AMERICAN LEGION AUXILIARY**

## **DEPARTMENT OF NORTH CAROLINA**

## ANNUAL CONVENTION CREDENTIALS CERTIFICATE

UNIT	CITY	DISTRICT	DIVISION	DATE
pay for each de the entire voti	elegate. Example: If your l ng strength (5 Delegates=\$		s and only one person d in order for your Unit	
This is to certify that			Unit No	
Convention. It	t will be necessary for Unit	Alternates (if attending) to r s to elect Delegates and Alte Alternates (if attending) and	rnates by May 25, 202	
ALA Uni	ALA Unit President		ALA Unit Secretary	
	UNIT DELEGATION CH	AIRMAN		
Delegates:		Alternates		
2		2		·
3		3	***************************************	A. LANGUAGE CO. APPRICATION
4	Market 14 Mark	4		
5		5		
7		7		
DELEGATES-A				Markon halo no 1
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2. Mail original with a check made payable to American Legion Auxiliary, with all registration fees. Including Delegates, Delegates-at-Large and Alternates and Guest attending to: American Legion Auxiliary, PO Box

1. Please print or type. Be sure to keep a copy for your Unit Records.

25726, Raleigh NC 27611