



VFW AUXILIARY, VIRGINIA DEPARTMENT CONVENTION OFFICIAL DELEGATES AND ALTERNATES FORM



**NOT ACCEPTED BEFORE APRIL 1, NOR AFTER MAY 26th, 2024
of the Current Calendar Year**

~~THIS FORM MUST BE TYPED~~

TO: Ellen Stogsdill, Department Secretary
VFW Auxiliary, Virginia
6522 Chartwell Drive
Virginia Beach, Virginia 23464-3532
(757) 777-7194 ellenstogsdill@cox.net

TO: Jerry Miller, Credential Chairman
VFW Auxiliary, Virginia
PO BOX 233
Catharpin, VA 20143
(571) 236-3605 JPM561@aol.com

Per Section 304 of the National Bylaws, “Delegates and Alternates to the Department Convention shall be elected at a regular meeting of the Auxiliary held not less than thirty (30) calendar days prior to department Convention which starts on June 11, 2024; one for each thirty (30) members or fraction thereof in good standing on March 31. The VFW Auxiliary Secretary shall provide the names of the Delegates and Alternates to the Department Secretary and Credential Chairman, within thirty (30) calendar days of the day of election” and **no later than MAY 26th**.

The Auxiliary Secretary is to print out a copy of the Delegate(s) and Alternate(s) for his or her records.

*This is to certify that the Delegate(s) and Alternate(s) listed below were duly elected to represent our VFW Auxiliary at the upcoming Department Convention on June 11-14, 2024, based on the total VFW Auxiliary membership as of **MARCH 31** in the MALTA System. Membership as of _____ is _____ Divided by 30 = _____ Delegates/Alternative for 2024-2025. **Example: Membership as of 3/31/2023 is 299 divided by 30 = 9.96 = 10 Delegates/Alternates.***

DELEGATE/ALTERNATE WILL NEED TO SHOW MEMEBERSHIP CARD WHEN CHECKING IN AT CREDENTIAL DESK.

Any questions or you need additional lines, contact the Department Secretary. ellenstogsdill@cox.net

THIS FORM MUST BE TYPED

	Delegate			Alternate	
	First Name	Last Name		First Name	Last Name
1			1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
9			9		
10			10		
11			11		
12			12		
13			13		
14			14		
15			15		
16			16		
17			17		
18			18		
19			19		
20			20		

Secretary Name	E-Mail Address	Phone Number
----------------	----------------	--------------