

**LADIES AUXILIARY of THE FLEET RESERVE ASSOCIATION**

**REGIONAL DELEGATE SHEET**

The following members have been elected to represent:

UNIT NUMBER: \_\_\_\_\_ CITY & STATE: \_\_\_\_\_

UNIT NAME: \_\_\_\_\_ REGION: \_\_\_\_\_

of the Ladies Auxiliary of the Fleet Reserve Association at the \_\_\_\_\_ Regional Convention to be held \_\_\_\_\_ at the \_\_\_\_\_

**DELEGATES**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_

**ALTERNATE DELEGATES**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_
- 7. \_\_\_\_\_

If a delegate is not elected, or if none of the above are in attendance, the following Proxy (or Alternate Proxy) is authorized to represent this Unit.

**PROXY**

**ALTERNATE PROXY**

\_\_\_\_\_ UNIT \_\_\_\_\_      \_\_\_\_\_ UNIT \_\_\_\_\_

PROXY/ALTERNATE PROXY is INSTRUCTED

UNINSTRUCTED

We, the undersigned, do hereby attest that the members of our Unit at a regularly stated meeting, a quorum being present, DID  , DID NOT  approve and grant the chairman of the Unit's Convention Delegation, the authority to add the name of any member in good standing of this Unit present at the Regional Convention to the above Delegate List, up to the authorized voting strength.

\_\_\_\_\_  
SIGNATURE OF PRESIDENT

\_\_\_\_\_  
SIGNATURE OF SECRETARY

\_\_\_\_\_  
PRINTED NAME OF PRESIDENT

\_\_\_\_\_  
PRINTED NAME OF SECRETARY

**RETAIN ONE COPY FOR UNIT FILE, ONE COPY MUST REACH THE FOLLOWING 20 DAYS PRIOR TO THE CONVENING OF REGIONAL CONVENTION.**

**REGIONAL PRESIDENT**

**CONVENTION CHAIRMAN**

**CREDENTIALS CHAIRMAN**

UNIT NUMBER \_\_\_\_\_

AUTHORIZED VOTES AS OF 3/31/\_\_\_\_