

**DELEGATE FORM (top portion)**  
**2010 NARFE STATE CONVENTION- APRIL 19-20, 2010**

Please print or type:

Chapter No: \_\_\_\_\_ Chapter Name: \_\_\_\_\_ Location: \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Delegate \_\_\_\_\_ Alternate \_\_\_\_\_ Proxy for Chapter \_\_\_\_\_

I wish to serve on the following committees: Membership\_\_\_ Legislation\_\_\_ Credentials\_\_\_  
Service Officer Committee\_\_\_ Public Relations\_\_\_ Rules\_\_\_ Nomination\_\_\_ Resolutions\_\_\_  
Constitution & Bylaws\_\_\_ Financial Ways & Means and Audit Committee\_\_\_  
PAC Committee\_\_\_ Alzheimer's\_\_\_ Time & Place\_\_\_ Ballot & Teller\_\_\_

Signature of Chapter Secretary \_\_\_\_\_

-----Cut delegate form in two separate pieces-----

**DELEGATE FORM (bottom portion)**  
**2010 NARFE STATE CONVENTION- APRIL 19-20, 2010**

Please print or type:

Chapter No: \_\_\_\_\_ Chapter Name: \_\_\_\_\_ Location: \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Delegate \_\_\_\_\_ Alternate \_\_\_\_\_ Proxy for Chapter \_\_\_\_\_

Signature of Chapter Secretary \_\_\_\_\_

**Instructions:** If **you plan to attend** the Convention as a delegate or alternate fill out both the top and bottom portion; Chapter Secretary must sign. Please return top half to Federation Secretary, Lynda LeMay, 1608 Hunt Lane, Pleasant View TN 37146. Bottom portion will be retained by Delegate to present to Credentials Committee.

If **no one from your Chapter will attend**, please find someone from another chapter who will serve as your proxy. The name, address of the person serving as proxy should appear above and the "Proxy For Chapter" should have an "X". Send the top half of the form to the Federation Secretary and the bottom half to the person that is your proxy. If there is any question, please call Carey Frazier at (615) 373-4817.