



Disabled American Veterans, Department of South Carolina
Post Office Box 5317
West Columbia, South Carolina 29171-5317
Phone: (803) 713-5851
Fax: (803) 791-1399

South Carolina Convention 2021 Delegates

This is to certify that the following delegates and alternates were **Elected**, at a regular chapter meeting to represent the DAV Chapter indicated below at the Annual State Convention:

Held by: Chapter _____

Date: _____

DELEGATES

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____
- 11) _____
- 12) _____
- 13) _____
- 14) _____
- 15) _____

ALTERNATES

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____
- 11) _____
- 12) _____
- 13) _____
- 14) _____
- 15) _____

Signed: _____
Chapter Commander

Signed: _____
Chapter Adjutant

This form must be completed and signed by the proper officers and returned to the Department Adjutant (see address above), within five (5) days after said election and not less than fifteen (15) days before said convention.

FAILURE TO COMPLETE THIS FORM AND RETURN AS NOTED ABOVE MAY RESULT IN MEMBERS NOT BEING PERMITTED TO REGISTER AS ELECTED DELEGATES AND/OR ALTERNATES.



DAV 2021

**Department of SC Convention
Delegates Credentials**

Name: _____

Is Certified as a duly elected delegate to represent

Chapter No.: _____

Chapter Adjutant

Chapter Commander

Both Signatures Required
Keep in your possession
Do Not mail to Headquarters



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