

**MICHIGAN DEPARTMENT VFW AUXILIARY
DISTRICT DELEGATES & ALTERNATES 2023-2024**

Auxiliary # _____ District # _____ Date _____

Membership at the time of Election _____ Number of Delegates Allowed _____

Allowed: **One Delegate and One Alternate for each 15 members or fraction thereof** in good standing at the time of election.
District Delegates & Alternates must be elected at a regular meeting held **NO LESS than 30 days** prior to the District
Convention. **Mail to your District Secretary immediately after election.** Keep one copy for your Auxiliary files

For District Sec. Use.

For District Sec. Use

DELEGATES	April or May	Aug. or Sept.	Nov. or Dec.	Jan. or Feb.		ALTERNATES	April or May	Aug. or Sept.	Nov. or Dec.	Jan. or Feb.
1.						1.				
2.						2.				
3.						3.				
4.						4.				
5.						5.				
6.						6.				
7.						7.				
8.						8.				
9.						9.				
10.						10.				
11.						11.				

If additional lines are needed, please use the back of this form.

	April or May		Aug. or Sept.	Nov. or Dec.	Jan. or Feb.
2022-2023 President		2023-2024 President Name: Address:			
2022-2023 Sr. Vice President		2023-2024 Sr. Vice President			
2022-2023 Jr. Vice President		2023-2024 Jr. Vice President			

Additional Space:

For District Sec. Use.

For District Sec. Use

DELEGATES	April or May	Aug. or Sept.	Nov. or Dec.	Jan. or Feb.		ALTERNATES	April or May	Aug. or Sept.	Nov. or Dec.	Jan. or Feb.
12.						12.				
13.						13.				
14.						14.				
15.						15.				
16.						16.				
17.						17.				
18.						18.				
19.						19.				
20.						20.				
21.						21.				
22.						22.				
23.						23.				
24.						24.				
25.						25.				
26.						25.				
27.						27.				

This is to verify that the following Delegates, Alternates and Officers have been elected to fill these positions.

Auxiliary Secretary Signature

If you do not know at the time of the election who will be officers for the next administrative year, please leave blank and the District Secretary will get them at the Aug. /Sept. District meeting. District Secretary Name and address is listed below.

District Secretary Listing for 2022-23

District 4	Michelle Stafford 17185 Sumpter Rd Belleville MI 48111	E: stmic@att.net
District 5	Pam Croyle 20086 Trailwood Dr. Warren MI 48092	E: pamcroyle@yahoo.com
District 6	Ruth Later 236 Maple Run Mason MI 48854	E: ruthlater6785@att.net
District 7	Sheryl Proteau 26488 Q Dr. N Albion MI 49224	E: mamabear1207@yahoo.com
District 8	Cynthia Peto 4935 W. Bath Rd. Perry MI 48872	E: ccpeto@yahoo.com
District 9	Jan Passmore 329 N. Knowlton Elsie MI 48831	E: janione@frontier.com
District 10	Carol Worvie 1260 N. Gale Road Davison MI 48423	E: cworvie@gmail.com
District 11	Victoria Bushong 5201 E. Valley Rd. Mt. Pleasant MI 48858	E: vickiebushong@yahoo.com E
District 12	Wendi Hall 4849 Williams St Montague MI 49437	E: wendihall68@gmail.com
District 13	Judy Brown 16960 Hayes Rd Hillman MI 49746	E: angels95jmb@outlook.com
District 14	Renae Petrocik 224 Water Street Negaunee MI 49866	
District 15	Elaine Archambeau 11445 DesRochers Road Pelkie MI 49958	E: emarch@up.net

**MICHIGAN DEPARTMENT VFW AUXILIARY
924 N. WASHINGTON AVE.
LANSING, MI. 48906-5136**

DEPARTMENT DELEGATE AND ALTERNATE REGISTRATION

DEPARTMENT CONVENTION 2023

AUXILIARY # _____

DISTRICT # _____

Membership as of **February 28, 2023** _____

Please type or print clearly all the names of your Delegates/Alternates. If you need more room, please attach on separate sheet of paper. One Delegate, One Alternate for each 30 members or fraction thereof in good standing in the Auxiliary at the time of the election of such. Must be elected not less than **(30) days prior to the Department** Convention. Delegates are elected to serve for one entire year, from election to election.

Check the box in front of the name if attending Convention

Printed credentials will be available for those indicated by placement of an x beside the name of the delegate/alternate attending, credentials will be printed for only those with an "x" beside their name.

(Example: 61 members would equal 3 delegates and alternates)

	x	DELEGATES		x	DELEGATES
1			8		
2			9		
3			10		
4			11		
5			12		
6			13		
7			14		

Number of Auxiliary Delegate votes _____

Delegate Fee \$7.00 each \$ _____

President's vote 1

President's Fee \$7.00 \$ 7.00

TOTAL DELEGATES _____

TOTAL DELEGATE FEE \$ _____

ALTERNATE FEES OPTIONAL

TOTAL ALTERNATES _____

Alternate Fee \$7.00 each \$ _____

TOTAL PAID \$ _____

Check Number _____

For Office Use

Date Delegates form received _____ Amount Correct _____ Fees Owed _____

TOTAL FEES MUST BE PAID OR THE AUXILIARY IS IN ARREARS TO DEPARTMENT

We certify that the Delegates/Alternates listed have been duly elected to represent our Auxiliary at the 96th Annual Michigan Department VFW Auxiliary Convention, June 8-11th.

Signed _____
2022-2023 President

Signed _____
2022-23 Secretary

2023-2024 President

SENIOR AND JUNIOR VICE PRESIDENTS' NAMES ARE REQUIRED

Article VI Departments, Sec. 602 Composition. In the absence of the Auxiliary President, the Auxiliary Senior Vice President, or in her absence, the Auxiliary Junior Vice President may be registered and function as a member of the Convention, but only one Officer, in addition to Delegates, may represent any Auxiliary.

2022-2023 Sr. Vice President

2022-2023 Jr. Vice President

2023-2024 Sr. Vice President

2023-2024 Jr. Vice President

***Alternates must be listed.
Check the box in front of the name, if attending Convention***

Printed credentials will be available for those indicated by placement of an x beside the name of the delegate/alternate attending, credentials will be printed for only those with an "x" beside their name.

	x	ALTERNATES		x	ALTERNATES
1		<u>President's Name:</u>	8		
2			9		
3			10		
4			11		
5			12		
6			13		
7			14		

Return this form with proper amount to:

Michigan Dept. VFW Auxiliary, 924 N. Washington Ave., Lansing, MI 48906

Credentials will be available for pick up at the Credentials desk.

If improper fees are received, the Delegates that register will be responsible for the correction.

UNWAVERING SUPPORT



FOR UNCOMMON HEROES™

VETERANS OF FOREIGN WARS AUXILIARY

This form is to be filled out and entered into our MALTA by the Auxiliary Secretary ONLY. The Department Secretary can enter it into MALTA on behalf of the Auxiliary if you so choose. It is only to be completed after the March 31, 2023, official membership is disclosed in MALTA. Finally, your last option is to send it by snail mail.

Mail to:

National Secretary

VFW Auxiliary

406 West 34th Street, 10th Floor

Kansas City, Missouri 64111

This MUST be received by May 31, 2023.

Respectfully,

Sandi Onstwedder

Department of Michigan VFW Auxiliary Secretary

UNWAVERING SUPPORT FOR UNCOMMON HEROES™

VFW AUXILIARY TO DEPARTMENT OF MICHIGAN • 924 N. WASHINGTON AVENUE • LANSING, MICHIGAN 48906



NOT ACCEPTED BEFORE APRIL 1, NOR AFTER MAY 31
of the Current Calendar Year

NATIONAL CONVENTION OFFICIAL DELEGATES AND ALTERNATES

~~DO NOT SEND THIS FORM IN IF NAMES HAVE BEEN INPUT ONLINE~~

TO: National Secretary
VFW Auxiliary
406 West 34th Street, 10th Floor
Kansas City, Missouri 64111

FROM: AUXILIARY NO. _____ DEPARTMENT OF _____
AUXILIARY NAME _____
CITY AND STATE _____

Per Section 305 of the National Bylaws, "Delegates and Alternates to the National Convention shall be elected at the last regular meeting in April; one for each fifty (50) 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 National Secretary, along with their membership ID number, within thirty (30) calendar days of the day of election" and no later than MAY 31. The Auxiliary Secretary is asked to input his or her Auxiliary's Delegate(s) and Alternate(s) online in MALTA via use of their respective membership ID number(s) and 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 National Convention on _____ based on the total VFW Auxiliary membership as of MARCH 31 in the MALTA System.

ID Number and Name ARE REQUIRED to complete this form.
TYPE or PRINT NEATLY each Delegate's or Alternate's ID NUMBER and NAME.

~DELEGATE CREDENTIALS WILL BE ISSUED AT CONVENTION SITE UPON CHECK-IN.~

DELEGATES		ALTERNATES	
ID NUMBER	MEMBER'S FIRST AND LAST NAME	ID NUMBER	MEMBER'S FIRST AND LAST NAME
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Auxiliary Secretary)

(Address)

(City, State & Zip Code)

NOTE: This is a listing only. (NO CHECKS ARE TO BE INCLUDED WITH THIS FORM.)

MICHIGAN DEPARTMENT VFW AUXILIARY

District # _____

Auxiliary # _____

Date _____

President _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

Sr. Vice President _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

Jr. Vice President _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

Secretary _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

Treasurer _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

Chaplain _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

Conductress _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

Guard _____

Phone (____) _____

Address _____

City _____

Zip _____ Email _____

1 Year Trustee _____

Phone (____) _____

Address _____

City _____ Zip _____

2 Year Trustee _____

Phone (____) _____

Address _____

City _____ Zip _____

3 Year Trustee _____

Phone (____) _____

Address _____

City _____ Zip _____

Keep one copy of form for the Auxiliary President, send a copy to your District President and one to the Department Office.

Michigan Department VFW Auxiliary Appointed Chairman 2023-2024

District # _____ Auxiliary # _____

Keep one copy of this form for the Auxiliary President and send a copy to your District President and the Department Office following installation of officers.

AMERICANISM/PATRIOTIC INSTRUCTOR	Phone:
Chairman	
Address	Email:
BUDDY POPPY / NATIONAL HOME	Phone:
Chairman	
Address	Email:
CHIEF OF STAFF	Phone:
Chairman	
Address	Email:
AUXILIARY OUTREACH	Phone:
Chairman	
Address	Email:
HOSPITAL	Phone:
Chairman	
Address	Email:
LEGISLATIVE	Phone:
Chairman	
Address	Email:
MEDIA RELATIONS	Phone:
Chairman	
Address	Email:
MENTORING FOR LEADERSHIP	Phone:
Chairman	
Address	Email:
MEMBERSHIP	Phone:
Chairman	
Address	Email:
SCHOLARSHIPS	Phone:
Chairman	
Address	Email:
VETERANS & FAMILY SUPPORT	Phone:
Chairman	
Address	Email:
YOUTH ACTIVITIES / CAMP TROTTER	Phone:
Chairman	
Address	Email: