

DAV DEPARTMENT OF MICHIGAN  
DELEGATE CERTIFICATION FORM  
2025 STATE CONVENTION

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INSTRUCTIONS

Chapters are entitled to delegates at the State Convention, as outlined in Bylaws Article 8, Section 8.2 (shown below):

**8.2 Delegates**

*8.2(a) Each Chapter shall be entitled to one delegate and one alternate for its charter and one delegate and one alternate for each twenty-five (25) members or major fraction thereof on whom a per capita tax has been received by Department headquarters at least ten (10) days prior to the State Convention.*

*8.2(b) All Chapter delegates and alternates shall be chosen by their respective Chapters at least twenty (20) days prior to the State Convention and certified to the State Adjutant prior to the opening of the State Convention on forms provided by Department Headquarters*

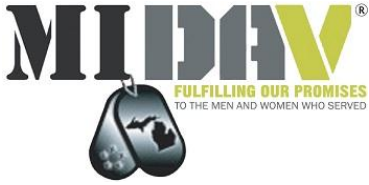
- Please clearly print the Delegates' names and membership codes
- The completed form is due by May 22, 2025.  
Mail to: DAV Department of Michigan  
PO Box 26031  
Fraser, MI 48026

Or

Via email to: [MIDAVHQ@davmichigan.com](mailto:MIDAVHQ@davmichigan.com)

**For the form to be valid please ensure the Delegate names and membership numbers are listed and the form is signed.**

- If you have any questions, please call the Department at 586-415-8610 or email the Department at [midavhq@davmichigan.com](mailto:midavhq@davmichigan.com).



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COMPLETE AND RETURN NO LATER THAN MAY 22, 2025

CHAPTER NUMBER: \_\_\_\_\_ CHAPTER NAME: \_\_\_\_\_

This is to certify that the following individuals have been duly elected as your Chapter Delegates for the annual state convention being held **June 11 and June 12, 2025** in Mt. Pleasant, Michigan.

**CERTIFICATION OF 2025 CHAPTER DELEGATES AND DELEGATE ALTERNATES**

According to Department records, the individuals whose names are printed below will serve as your Chapter Delegates for the 2025 Annual State Convention representing your chapter.

A chapter's delegation will not be seated if the chapter is not in good standing or if the chapter is under suspension at the time of the convention.

**DELEGATE CERTIFICATION (Names and Membership codes are required)**

[Use additional page(s) if needed]

DELEGATE NAME	DELEGATE MEMBERSHIP CODE

I/we certify that all representatives of our chapter listed on this form are members in good standing and are authorized to vote on the chapter's behalf at the annual Department of Michigan Convention.

\_\_\_\_\_  
SIGNATURE: Chapter Commander or Adjutant

\_\_\_\_\_  
Print Name and Title

**Please send the completed form by May 22, 2025:**

DAV Department Headquarters  
PO Box 26031, Fraser, MI 48026  
or via email to: [midavhq@davmichigan.com](mailto:midavhq@davmichigan.com)