DUPLICATE: Mail to: Convention Committee

TRIPLICATE: Mail to: State Secretary

(For Delegate to NATIONAL ASSOCIATION OF POSTAL SUPERVISORS Present at Convention)

Delegate Credentials

THIS WILL CERTIFY THAT	T	
(n	ame)	*
is a member in good standing of		
	(Br. Name)	(Br. #)
and has been duly elected to rep	resent that	Branch at the State
Convention of the Florida Branch	N.A.P.S. to	o be held at
·	on	
Attest:	/S/	
Branch Secretary		Branch President

(For Delegate to NATIONAL ASSOCIATION OF POSTAL SUPERVISORS Present at Convention)

DUPLICATE: Mail to:
Convention Committee TRIPLICATE: Mail to: State Secretary

Delegate Credentials



THIS WILL CERTIFY T	HAT	
	(name)	
is a member in good sta	anding of	
	(Br. Name)	(Br. #)
and has been duly elect	ted to represent that Branch a	t the State
Convention of the Florid	da Branch N.A.P.S. to be held	at
	on	
***	101	
Attest:	/S/	
Branch Secretary	Branch Pr	resident