Delegate Credential Form 202%Advent Christian General Conference Triennial Convention

This is to certify that the following named persons	Signature:
have been duly elected/appointed to represent:	Position:
	Date:
Name of Church, Conference or Associate	
List Delegates	Below (Please type or print)
Name:	Address:
Ordained/Licensed Minister	City:
☐ Lay Person	State: Zip: 3
Name:	Address:
Ordained/Licensed Minister	City: S
☐ Lay Person	State:Zip: sign of the state is a second of the state is a
Name:	State: Zip: ####################################
Ordained/Licensed Minister	City: 2
☐ Lay Person	State: Zip:
Name:	Address: 3
Ordained/Licensed Minister	City: S
☐ Lay Person	State: Zip:
Name:	Address: 3 City: 5 State: Zip: 1 Address: 1 City: 1 State: 7 Tip: 0
Ordained/Licensed Minister	City:
☐ Lay Person	State: Zip: O
Name:	Address:
Ordained/Licensed Minister	City:
☐ Lay Person	State: Zip: