



AUXILIARY TO SONS OF UNION VETERANS OF THE CIVIL WAR CERTIFICATION OF ELECTION AND INSTALLATION OF AUXILIARY OFFICERS

(Send two copies to Department Secretary and retain a duplicate for Auxiliary's Records)

Auxiliary Name	Number	Department	Employer ID No. (EIN)
Street Address	City	State	ZIP Code
Meetings held at (location)	Time of Meetings		

OFFICERS INSTALLED

<u>Name</u>	<u>Address</u>	<u>City</u>	<u>State</u>	<u>ZIP Code</u>
President:				
Phone:		Email Address:		
Vice President:				
Phone:		Email Address:		
Council No. 1:				
Phone:		Email Address:		
Council No. 2:				
Phone:		Email Address:		
Council No. 3:				
Phone:		Email Address:		
Secretary:				
Phone:		Email Address:		
Treasurer:				
Phone:		Email Address:		
Patriotic Instructor:				
Phone:		Email Address:		
Chaplain:				
Phone:		Email Address:		
Press Correspondent:				
Phone:		Email Address:		

Guide: _____

Phone: _____ *Email Address:* _____

Assistant Guide: _____

Phone: _____ *Email Address:* _____

Color Guard No. 1: _____

Phone: _____ *Email Address:* _____

Color Guard No. 2: _____

Phone: _____ *Email Address:* _____

Inside Guard: _____

Phone: _____ *Email Address:* _____

Outside Guard: _____

Phone: _____ *Email Address:* _____

Counselor: _____

Phone: _____ *Email Address:* _____

CERTIFICATION OF ELECTION OF DELEGATES *(In Good Standing, to represent this Auxiliary at the next Department and National Encampments)*

Department Encampment

National Encampment

Delegate No. 1: _____ **National Delegate:** _____

Delegate No. 2: _____ **National Alternate:** _____

Alternate Delegate No. 1: _____

Alternate Delegate No. 2: _____

SIGNATURE OF INSTALLING OFFICER AND AUXILIARY OFFICERS

Date

Installing Officer

Auxiliary Secretary

Auxiliary President

Signature

Signature

Signature

Signature

Printed Name

Printed Name

Printed Name

Received at Department Headquarters on this date: _____ Signature of Department Secretary: _____

PAST AUXILIARY PRESIDENTS *(In Good Standing)*

Name

Address

City

State

ZIP Code

PAST AUXILIARY SECRETARIES & TREASURERS *(In Good Standing, who have served 5 or more consecutive years)*

Name

Address

City

State

ZIP Code

PAST DEPT. PRESIDENTS, PAST DEPT. SECRETARIES & PAST DEPT. TREASURERS *(In Good Standing)*

Name

Address

City

State

ZIP Code

PAST NATL. PRESIDENTS, PAST NATL. SECRETARIES & PAST NATL. TREASURERS *(In Good Standing)*

Name

Address

City

State

ZIP Code
