

VFW AUXILIARY CREDENTIAL FORM

AUXILIARY NUMBER _____

DISTRICT NO. _____

JUNE 21-23, 2025

One (1) Delegate and one (1) Alternate for each thirty (30) Members and fraction thereof

Delegates

Fraction

Grand

Total

CURRENT MEMBERSHIP _____ divide by 30 = _____ + _____

	Membership		Delegates		Fraction	Total	Amount
Example	65	divide by 30 :	2.17	2	+	1	\$6.00
Example	120	divide by 30 :	4.00	4	+	0	\$8.00

\$2 EACH PER PRESIDENT, DELEGATE, PAST DEPARTMENT PRESIDENT & STATE OFFICERS

DELEGATE NAMES

AMOUNT \$2 EA

PRESIDENT

ALTERNATE NAMES

1

1

2

2

3

3

4

4

5

5

6

6

7

7

8

8

9

9

10

10

11

11

12

12

PAST DEPT
PRESIDENT

STATE
OFFICER

TITLE

MAKE CHECK PAYABLE TO:
VFW AUXILIARY DEPT OF SC

Complete and return to:
Sharen Peterson
3253 Kendallock Circle
Ladson, SC 29456
treasvfwauxsc@gmail.com

Check No.
Amt. Paid

Approved:
Initials

Signed:

Title:

Auxiliary President

Auxiliary Secretary

e-mail confirmation