

ASSOCIATION FOR THE IMPROVEMENT OF MINORITIES IN THE INTERNAL REVENUE SERVICE  
2016 Annual Business Meeting

DELEGATE CERTIFICATE

CERTIFICATE A

1. \_\_\_\_\_  
Regional Location of Chapter

2. \_\_\_\_\_  
Chapter's Official Name

3. \_\_\_\_\_  
Name of Delegate #1 (Print or Type)

\_\_\_\_\_ Name of Alternate #1 (Print or Type)

\_\_\_\_\_ Name of Delegate #2 (Print or Type)

\_\_\_\_\_ Name of Alternate #2 (Print or Type)

4. \_\_\_\_\_  
Chapter President's Name (Print or Type)

\_\_\_\_\_ REGIONAL V/P's Signature/Date

5. \_\_\_\_\_  
Chapter President's Mailing/E-mail Address

\_\_\_\_\_ Chapter President's Signature/Date

*This Certificate is provided in compliance  
with Article X, Sec. (1) National Bylaws.*

2016 Annual Business Meeting

PROXY CERTIFICATE

CERTIFICATE B

1. \_\_\_\_\_  
Regional Location of Chapter

2. \_\_\_\_\_  
Chapter's Official Name

3. \_\_\_\_\_  
Name of Proxy #1 (Print or Type)

\_\_\_\_\_ Name of Proxy #2 (Print or Type)

4. \_\_\_\_\_  
Chapter President's Name (Print or Type)

\_\_\_\_\_ REGIONAL V/P'S Signature/Date

\_\_\_\_\_ Chapter President's Mailing/E-mail Address

\_\_\_\_\_ Chapter President's Signature/Date

**This Certificate is provided in compliance  
with Article X, Sec. (1) National Bylaws**

# Instructions for Completion of Certificate A and B

## CERTIFICATE A Delegate

- Item 1. Regional Location of Chapter:** Enter the Region. If unsure, get clarification from the Regional Vice-President.
- Item 2. Chapter's Official Name:** Enter the chapter's official name (print or type), as it appears on the official terms of affiliation by your Chapter.
- Item 3. Name of Delegates:** Print or type the names of Chapter Delegates. Two delegates will be allowed to sit on the floor in the business session where debate is taking place. The Alternate will be allowed to debate only in the absence of the delegate. The Alternate can only replace the delegate as indicated on the certificate.
- Item 4. Chapter's President's Name:** Enter the Chapter's President's **Regional Vice-President's signature and date:**
- Item 5. Chapter's President's mailing address, signature and date:**

## CERTIFICATE B Proxy

**A proxy must be used when the chapter representative is not a member of said chapter**

- Item 1. Regional Location of Chapter:** Enter the Region. If unsure, get clarification from the Regional Vice-President.
- Item 2. Chapter's Official Name:** Enter the chapter's official name (print or type), as it appears on the official terms of affiliation by your chapter.
- Item 3. Name of Proxy:** Print or type the names of the selected Proxy(s) and identify the Chapter in which said Proxy holds membership. The Proxy must maintain a chapter membership within your Region.
- Item 4. Chapter's President's Name:** Enter the Chapter's President's **Regional Vice-President's signature and date:**
- Item 5. Chapter's President's mailing address, signature and date:**

**The completed certificates must be mailed to the Regional Vice-President. The Regional Vice-President must sign, date and submit the completed certificates to:**

**La-Tarvia Hilbert**  
National Corresponding Secretary  
2250 Primrose Pl Ln  
Lawrenceville, GA 30044

ASSOCIATION FOR THE IMPROVEMENT OF MINORITIES IN THE INTERNAL REVENUE SERVICE  
2016 Annual Business Meeting

DELEGATE AT-LARGE CERTIFICATE

CERTIFICATE C

1. \_\_\_\_\_  
Chapter Membership

2. \_\_\_\_\_  
Name of Delegate At-Large (Print or Type) Delegate At-Large (Signature/Date)

\_\_\_\_\_  
Delegate At-Large Mailing/E-mail Address

3. \_\_\_\_\_  
NATIONAL PRESIDENT'S SIGNATURE DATE

This certificate is provided in compliance with Article X, Sec. (4) National Bylaws.

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2016 Annual Business Meeting

PROXY CERTIFICATE

CERTIFICATE D

1. \_\_\_\_\_  
Name of Proxy #1 (Print or Type) Name of Proxy #2 (Print or Type)

2. \_\_\_\_\_  
National President's Name (Print or Type)

3. \_\_\_\_\_  
National President's Mailing/E-mail Address

4. \_\_\_\_\_  
National President's Signature/Date

This Certificate is provided in compliance  
with Article X, Sec. (2) (b) National Bylaws

# Instructions for Completion of Certificate C and D

## CERTIFICATE C

### Delegate At-Large

**Item 1. Chapter Membership:** Enter the name of your Chapter

**Item 2. Name of Delegate At-Large:** Print or type your name.

**Item 3. Delegate At-Large Mailing Address:** Enter Delegate At-Large current mailing address...

**Item 4. National President's Signature/Date:**

### Delegates At-Large includes the following:

National President

National Senior Vice-President

Past National Presidents

Past National Senior Vice-Presidents

Regional Vice-Presidents (Current)

Regional Representative (Current)

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## CERTIFICATE D

### Proxy

**A proxy must be used when the Delegate At-Large is not a member of said chapter.**

**Item 1. Name of Proxy(s) 1 and 2:** Print or type the name(s) of the selected Proxy(s). The Proxy must be an active member in good standing of the past National President's Advisory Committee.

**Item 2. National President's Name:** Enter the National President's name.

**Item 3. National President's mailing address.**

**Item 4. Signature and date:**

**The completed certificates must be submitted to the National President. The National President must sign, date and submit completed certificates to:**

**La-Tarvia Hilbert**  
National Corresponding Secretary  
2250 Primrose Pl Ln  
Lawrenceville, GA 30044