LOCAL PRESIDENT'S DESIGNATION OF ALTERNATE TO THE 2019 DELEGATE ASSEMBLY

TO:	Chair, Compliance Constitution Committee	
FROM:	Local President's name (PLEASE PRINT)	Local President's signature
	Name of local association (PLEASE PRINT)	
DATE:	, 2019	
Please	register <u>(Alternate's name, PLEASE PRINT)</u>	
as a de	legate to the 2019 KEA Delegate Assembly.	
He/she	is replacing (original Delegate's name, PLEASE PRINT)	, an
electec	delegate who is unable to attend.	
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For Compliance Constitution Committee use only:		
Alterna	nte registered by: <u>(Name of CCC member or KEA staff)</u>	
Date: _		_
Memb	er #:	_
Memb	er work county:	_
Last 4 S	SSN:	_
Creden	tials issued to alternate: YES NO	