

**CONVENTION OF THE DIOCESE OF WASHINGTON  
CERTIFICATION OF THE ELECTION OF LAY DELEGATES**

<b>Parish/Mission/Congregation:</b>	<b>Journal # :</b>
	<b>Region # :</b>

*TO THE SECRETARY OF THE CONVENTION: I do certify that the hereinafter-named Lay Delegates and Alternate Delegates (duly chosen in accordance with Article 2 of the Constitution and Canon 2) are the authorized representatives of the above-named body of the Protestant Episcopal Church at the next Convention of the Diocese of Washington.*

Witness my hand this \_\_\_ day of \_\_\_\_\_ 20\_\_\_ Signature: \_\_\_\_\_

Date of Election: \_\_\_\_\_ Title: \_\_\_\_\_  
(Rector, Vicar, Priest-in-Charge, Warden, Vice-Chair, Secretary of Vestry/Cmte.)

**LAY DELEGATES**

<b>1.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

<b>2.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

<b>3.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

<b>4.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

<b>5.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

**ALTERNATE DELEGATES**

<b>1.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

<b>2.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip: :	E-mail:

<b>3.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

<b>4.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail:

<b>5.</b>		Office Phone:
	Street:	Home Phone:
	City: State: Zip:	E-mail: