



Must be completed and returned to the Detachment Adjutant immediately following your District Constitutional Conference.

**** THIS FORM MUST BE RETURNED NO LATER THAN JUNE 1 OF EACH YEAR ****

District # _____ Annual Conference held at _____ on _____

COMMANDER

Name _____ Squadron _____ Member ID# _____
Address _____ City _____, FL ZIP _____
Phone (_____) _____ Email _____

VICE COMMANDER

Name _____ Squadron _____ Member ID# _____
Address _____ City _____, FL ZIP _____
Phone (_____) _____ Email _____

ADJUTANT

Name _____ Squadron _____ Member ID# _____
Address _____ City _____, FL ZIP _____
Phone (_____) _____ Email _____

The following individuals were elected or appointed to the positions listed:

NAME	MEMBER ID#	POSITION	SQUADRON
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Detachment Constitution, Article IX, Section 9 reads:

At such District Conferences, only those Districts that have a membership over two-hundred (200) members, there shall be nominated one delegate and one alternate delegate to the National SAL Convention for each two-hundred (200) members or major fraction thereof in said District, to serve for the term of one year, when ratified and confirmed by the Detachment Convention. Alternate Delegates shall be recognized in the numerical order certified.

Delegate _____ Squadron _____ Member ID# _____
Address _____ City _____, FL ZIP _____
Alternate _____ Squadron _____ Member ID# _____
Address _____ City _____, FL ZIP _____

Attested: _____
DISTRICT COMMANDER DISTRICT ADJUTANT

Mail Form to: **Christian Rapp, Detachment Adjutant 215 Greenwood Ave | Lehigh Acres, FL 33936**

DOR (05/25)

Alternately, you may email the form to reports@floridasons.org