



# 2020 Oregon State Grange Convention

## Pomona Delegate(s)

Each Pomona Grange, in good standing, is encouraged to send delegates to the annual Oregon State Grange Convention. Two members from each Subordinate and Pomona Grange are permitted to vote on all issues brought before the membership during the convention including resolutions, policy changes, and election of State Officers. Voting delegates must be Fourth Degree members in good standing. These delegates shall be the Master and a second delegate elected by their members at a regular meeting or by their Executive Committee. A Master's spouse or significant other is NOT automatically the second delegate.

When a Subordinate/Community Master is also a Pomona Master, the Subordinate/Community Grange shall elect two (2) delegates as the Master serves the Pomona first. If a Master is unable to fulfill the duties of a delegate, the Grange shall elect two (2) delegates.

**INSTRUCTIONS:** Mail to the OSG office before September 1<sup>st</sup> or present this credentials form upon arrival at the Oregon State Grange Convention. 2<sup>nd</sup> Delegates and Alternate Delegates will not be permitted to vote without this form. Credentials form must be completely filled in, signed by the Master & Secretary, and affixed with the seal of the Grange. Those who have their credentials mailed in by September 1<sup>st</sup> will have their name tags waiting for them at registration.

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### Credentials of Pomona Delegates 2020 Oregon State Grange Convention

Pomona Grange Name: \_\_\_\_\_ Grange #: \_\_\_\_\_

Master (or elected 1<sup>st</sup> Delegate) Name: \_\_\_\_\_

Elected 2<sup>nd</sup> Delegate Name: \_\_\_\_\_

Elected 1<sup>st</sup> Alternate Delegate Name: \_\_\_\_\_

Elected 2<sup>nd</sup> Alternate Delegate Name: \_\_\_\_\_

This is to certify that the above named members are Fourth Degree members in good standing and have been duly elected to represent our Pomona Grange at the 2020 Oregon State Grange Convention.

Master: \_\_\_\_\_ Date: \_\_\_\_\_  
(signature)

-SEAL-

Secretary: \_\_\_\_\_ Date: \_\_\_\_\_  
(signature)