WESTERN AMERICAN DIOCESE OF THE SERBIAN ORTHODOX CHURCH IN NORTH AND SOUTH AMERICA

ANNUAL DIOCESAN ASSEMBLY 2018

CREDENTIALS FORM

CHURCH NAME	CITY
ELECTED DELEGATE (or Diocesan Coun	cil/Auditing Members KSS Penrecentative)
Name and Address:	en/Auditing Wembers, R55 Representative)
Date of Congregational Council or KSSA	ssambly when delegate was elected:
Date of Congregational, Council, or KSS Assembly when delegate was elected: ELECTION HEREBY CERTIFIED BY:	
Parish Priest	
(The Priest certifies that the elected delegate meets the same religion	ous and financial qualifications as required of those holding office.)
PARISH PRIEST	
Name of Priest:	Is attending: (yes) (No)
Signature:	If Not, why not? Write on back
PRESIDENT OF EXECUTIVE BOARD ((or Vice President as his Alternate)
Name of Executive Board Member. If not at	tending, then name of his VP Alternate
For Use by: Assembly CREDEN	TIALS / Verifications COMMITTEE
a) Are Congregational Assessments current b) If not, does it possess a written exception Comments of Credentials Committee:	for 2017 and prior years Yes No
Commence.	