

CERTIFICATION OF SELECTION OF DELEGATES

MAIL, FAX OR SCAN TO:

Executive Director
 Oklahoma Bar Association
 P. O. Box 53036
 Oklahoma City, OK 73152
 FAX: (405) 416-7001 / debbieb@okbar.org

DEADLINE: September 1

This is to certify that the following named persons are Active or Senior members of the _____ County Bar and have been duly elected by the active and senior members of the bar of said county as its delegates/ alternates to the House of Delegates of the Oklahoma Bar Association: *(Pursuant to OBA Bylaws "A member shall be **deemed to be a resident.... of the County in which is located his or her mailing address for the Journal of the Association."** Therefore, **the official address of your delegates and alternates must be located in the above county.**)*

DELEGATE(S)*

1. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
2. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
3. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
4. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
5. Name:		OBA No.
City:	E-Mail or Fax:	Phone:

ALTERNATE(S)*

1. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
2. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
3. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
4. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
5. Name:		OBA No.
City:	E-Mail or Fax:	Phone:

Attest:

APPROVED this ___ day of _____, 20__

 Secretary, County Bar Association

 President, County Bar Association

This is to certify that the above-named delegate(s) and alternate(s) are eligible to serve as member(s) of the House of Delegates of the Oklahoma Bar Association.

 John Morris Williams
 Executive Director / Custodian of Records