

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.)

DELEGATES

1. Name:		OBA No.
City:	Email 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:
6. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
7. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
8. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
9. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
10. Name:		OBA No.
City:	E-Mail or Fax:	Phone:

DELEGATES
CERTIFICATION OF SELECTION– (Delegates pg. 2)

11. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
12. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
13. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
14. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
15. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
16. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
17. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
18. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
19. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
20. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
21. 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

Deadline - September 1
ALTERNATES -- CERTIFICATION OF SELECTION (Alternates pg. 1)

1. Name:		OBA No.
City:	Email 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:
6. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
7. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
8. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
9. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
10. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
11. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
12. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
13. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
14. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
15. Name:		OBA No.
City:	E-Mail or Fax:	Phone:

Deadline - September 1
ALTERNATES -- CERTIFICATION OF SELECTION (Alternates pg. 2)

16. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
17. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
18. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
19. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
20. Name:		OBA No.
City:	E-Mail or Fax:	Phone:
21. Name:		OBA No.
City:	E-Mail or Fax:	Phone: