CERTIFICATION OF SELECTION OF DELEGATES

MAIL, FAX OR SCAN TO: **Executive Director**

Oklahoma Bar Association P. O. Box 53036 Oklahoma City, OK 73152

of the Oklahoma Bar Association.

FAX: (405) 416-7001 /	alishad@okbar.org	
and have been duly ele the House of Delegate a resident,, of the Co	ected by the active and senior members s of the Oklahoma Bar Association: <i>(Prounty in which is located his or her ma</i>	or Senior members of the County Bar of the bar of said county as its delegates/ alternates to arsuant to OBA Bylaws "A member shall be deemed to be ailing address for the Journal of the Association." ernates 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) a	are eligible to serve as member(s) of the House of Delegates

John Morris Williams

DEADLINE: September 1

Executive Director / Custodian of Records