

Certificate of Election—Form 9

Ancient Order of
HIBERNIANS
Irish • Catholic • American



Regular Election

Fill Vacancy

The following have been elected or appointed to ___Division ___State ___County Office. Their/his term will begin: _____
Insert date or word "Immediately"

Title	First Name	Last Name	Member #	Title	First Name	Last Name	Member #
President				Chmn Charities & Missions			
Vice President				Chmn. Catholic Action			
Recording Secretary				Chmn. F.F. A. I.			
Financial Secretary				Chmn. Pro-Life			
Treasurer				Chmn. P. E. C.			
Chmn. Standing Committees				Chmn Immigration			
Marshal				Veterans Affairs			
Sentinel				Webmaster			
Chaplain				Hibernian Hunger Project			
Historian				Project St. Patrick			
Organizer				Jr. Past President			

Division #

County Board

State Board

The above officers were elected or appointed to the office designated on: _____
Date

Presidents Name/Signature

Secretary's Name/Signature

Mail To:
 Ancient Order of Hibernians • PO Box 539 • West Caldwell, NJ 07007