

**District / State Credentials**

(circle one)

\_\_\_\_\_, 20 \_\_\_\_\_

This is to certify that the bearer, \_\_\_\_\_,

is a delegate from \_\_\_\_\_ County to the District / State meeting of the

Extension Association of New Mexico.

\_\_\_\_\_ County President

\_\_\_\_\_ Secretary

Approved:

\_\_\_\_\_  
Chairman Committee on Credentials

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