Testimonial of Change in Delegation

THE EPISCOPAL DIOCESE OF LONG ISLAND

THE 157th DIOCESAN CONVENTION NOVEMBER 10-11, 2023

Must be filed no later than November 3, 2023

CONGREGATION:			
(Print name of church, town, and county)			
I hereby certify that in accordance with the Constitution and Can the following change in our previously reported delegation has o		scopal Diocese	of Long Island,
	□ Delegate	□ Alternate	☐ Youth
(Print name of resigned Delegate)			
has resigned as a Delegate of the 157^{th} Diocesan Convention to November 10 and 11, 2023:	be held at the	Melville Marrio	ott on
PLEASE CHECK THE APPROPRIATE STATEMENT BELOW:			
 □ Delegate resigned. Another member of the congregation is ap □ Delegate resigned. No replacement 	ppointed to be	a Delegate.	
PLEASE PRINT CONTACT INFORMATION OF REPLACEMENT, IF APPLICABLE Name of Replacement:			
Email Address of Replacement:			
Phone Number of Replacement:			
Date of Birth (youth only):			
Name & email of Parent/Guardian (Youth only):			
CERTIFICATION BY RECTOR/PRIEST IN CHARGE (W		•	
That said DELEGATE so appointed is a confirmed Communicant in	_		
having domicile in the Diocese, and has been connected with said		=	eding twelve
months. Given under my hand, the day of			
Rector/Priest in Charge (or Warden o	f vacant cures)		

Completed testimonial must be emailed to convention@dioceseli.org no later than November 3, 2023