

CERTIFICATE OF DESIGNATION

This form must be filed with:
THE ASSOCIATION OF TOWNS OF THE STATE OF NEW YORK, 150 STATE STREET, ALBANY, NY 12207

No later than FEBRUARY 3, 2020
In order to establish eligibility and credentials to vote at the 2020 Business Session

TO: THE OFFICERS AND MEMBERS OF
The Association of Towns of the State of New York

To Ensure Correct Spelling On Badges, Please Print Or Type

I, _____, Town Clerk of the Town of _____, in
the County of _____ and State of New York DO HEREBY CERTIFY that
the town board of the aforesaid town has duly designated the following named person to attend
the Annual Business Session of the Association of Towns of the State of New York, to be held on
February 19, 2020, in the Astor Ballroom of the New York Marriott Marquis, 1535 Broadway, NYC,
NY 10036 and to cast the vote of the aforesaid town, pursuant to §6 of Article III of the Constitution
and Bylaws of said Association:

NAME OF VOTING DELEGATE _____
TITLE _____ E-MAIL ADDRESS _____
ADDRESS _____

In the absence of the person so designated, the following named person has been designated to
cast the vote of said town:

NAME OF ALTERNATE _____
TITLE _____ E-MAIL ADDRESS _____
ADDRESS _____

In WITNESS WHEREOF, I have hereunto set my hand and the seal of said town
this _____ day of _____, 20____.

Town Clerk