



THE ROMANIAN ORTHODOX EPISCOPATE OF AMERICA

ALTERNATE DELEGATE FORM 2023-2024

This is to certify that the General Assembly of our Parish, held on _____ 2023, has elected the following two alternates to the Episcopate Congress for the years 2023 and 2024.

PARISH NAME

CITY / STATE (PROVINCE)

ALTERNATE 1

LAST NAME

FIRST NAME

MIDDLE NAME

STREET

APT #

CITY

STATE/PROVINCE

ZIP/POSTAL

(AREA) HOME PHONE

(AREA) MOBILE PHONE *[optional]*

EMAIL (REQUIRED)

OCCUPATION OR SPECIAL TRAINING

ALTERNATE 2

LAST NAME

FIRST NAME

MIDDLE NAME

STREET

APT #

CITY

STATE/PROVINCE

ZIP/POSTAL

(AREA) HOME PHONE

(AREA) MOBILE PHONE *[optional]*

EMAIL (REQUIRED)

OCCUPATION OR SPECIAL TRAINING

Certified by us on this _____ day of _____ 2023.
(Date) (MONTH)

PARISH PRIEST SIGNATURE

PARISH COUNCIL SECRETARY SIGNATURE

**** RETURN THIS FORM NO LATER THAN APRIL 15, 2023.**

DELEGATES WILL NOT BE ACCEPTED WITHOUT THIS MANDATE PROPERLY SIGNED / SUBMITTED.

ROEA office use only

RECEIVED AT CHANCERY OFFICE :