

**Sons of Union Veterans of the Civil War**  
**Certification of Election and Installation of Department Officers**

Form 49 – Rev. November 2011

(Send to National Headquarters at SUVCW National HQ, 1 Lincoln Circle at Reservoir Park, Suite 240 (Nat'l Civil War Museum Bldg.), Harrisburg PA 17103-2411, within 30 days of installation of Officers – Retain duplicate for Department Records)

From the Department of \_\_\_\_\_ EIN \_\_\_\_\_ to National Executive Director, National Headquarters.

At the Annual Encampment of this Department held at (location) \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ the following Officers for the ensuing year were duly elected, appointed, and installed:

**OFFICERS INSTALLED**

Name (First, Middle, Last)	Street/PO Box	City	State	Zip Code	Phone	E-Mail
Department Commander:						
Senior Vice Commander:						
Junior Vice Commander:						
Council Member 1:						
Council Member 2:						
Council Member 3:						
Secretary:						
Treasurer:						
Patriotic Instructor:						
Chaplain:						
Graves Registration Officer:						
Historian:						
Civil War Memorials Officer:						
Eagle Scout Coordinator:						
Counselor:						
GAR Highway Officer:						
Department Organizer:						

Office:						
Office:						
Office:						
Office:						

**CERTIFICATION OF ELECTION OF DELEGATES**

The following, all in good standing in their respective Camps, were duly elected to represent this Department as DELEGATES to the next Annual National Encampment of the Sons of Union Veterans of the Civil War. (Attach additional sheet, if necessary.)

Name (First, Middle, Last)	City	State	Zip Code	Name (First, Middle, Last)	City	State	Zip

**PAST DEPARTMENT COMMANDERS**

The following Past Department Commanders are in good standing and are entitled to attend the Annual National Encampment of the Sons of Union Veterans of the Civil War. (Do NOT include deceased.)

Name (First, Middle, Last)	City	State	Zip Code	Name (First, Middle, Last)	City	State	Zip

**SIGNATURE OF INSTALLING OFFICER, DEPARTMENT OFFICERS, AND NATIONAL EXECUTIVE DIRECTOR**

Date: \_\_\_\_\_ Installing Officer: \_\_\_\_\_ Department Secretary: \_\_\_\_\_ Department Commander: \_\_\_\_\_ National Executive Director: \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_ Signature \_\_\_\_\_ Signature \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date received at National Headquarters: \_\_\_\_\_