## Alpha Iota State-Michigan of The Delta Kappa Gamma Society International

Salas Time \*\* and a decomposition are needed to use this pinners

### Dear Chapter President,

As chapter Visitations Chairman, I look forward to working with you as together we make arrangements for a state officer to visit and spend some time with your chapter members.

Each chapter is eligible for an official visit from a state officer or state committee chairman once during the 2013-2015 biennium. The officer or chairman may travel with another state member.

When requesting an official visitation from a state representative, Alpha Iota State Bylaws stipulates that the state will cover transportation and lodging expenses (if needed) for one official visit to your chapter during the biennium. If you request more than one visitation during the biennium, your chapter is then responsible for the expenses (transportation and lodging) for that officer. (State Bylaws and Standing Rules, Finances, E2 and E3). If you have a specific date in mind, such as a special function or anniversary, please send in your request early.

#### Your 2013-2015 officers are:

President: Liz VanWestenburg First vice-president: Nancy Everett Second vice-president: Bernice Haglund Recording Secretary: Gloria Richards Corresponding Secretary: Ranae Beyerlein

To request an official state visitation, please complete and submit the attached form to:

Chapter Visitations Chairman Sandy Downs Gamma Gamma Chapter 47755 Visitas Circle N Canton, MI 48188

Phone: 734-340-4229

Email: sandradowns412@gmail.com

All arrangements for official visits are made directly with me. If you have questions concerning official visits, please call me. I appreciate your commitment to the Society and to the state organization and look forward to working with you.

Sincerely,

Sandy Downs

Sandy Downs

# Alpha Iota State-Michigan

## The Delta Kappa Gamma Society International Request for Official State Visit 2013-2015 Biennium

Today's Date:	Chapter:		
From (name):	Title:		
Requesting visit from: (Name the State	e officer or chairman	you would like to ha	ve visit your chapter.)
1 <sup>st</sup> Choice:		_	
2 <sup>nd</sup> Choice:			
Chapter Contact Person:			
Address:			
Address:Street/ PO Box/ Apt. #	City	State	Zip
Phone:	Email:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1
Month/ Date and Time of meeting:	Please in	clude only if email is	checked regularly.
1st Choice:			
2 <sup>nd</sup> Choice:			
Location of meeting:  Please be specific, with a street addre			se side.
Nature of the meeting:			
Role of the State Visitor:			
Attire: (formal, professional, casual, et	c.)		
On the reverse side, please include som Your prompt return of this form is appr	_	-	-
Sandy Downs, Chapter Visitation Chai 47755 Vistas Circle N	rman Phone:	734-340-4229	
Canton, MI 48188	Email:	sandradowns412@gr	nail.com

Please make ALL arrangements for an official state visit directly with the Chapter Visitations Chairman listed above.