

# Credentials Certification



**IAFPD 2025 Annual Membership Meeting**  
**4:00 pm - Thursday, June 19, Champaign, IL 61820**

The undersigned certifies that he or she is the duly appointed and acting Secretary of the Board of Trustees of \_\_\_\_\_ Fire Protection District and that the persons listed herein are the duly appointed or elected Trustees of said Fire Protection District as of \_\_\_\_\_, 2025:

- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_ (Print name of Trustee)
- \_\_\_\_\_, Secretary

**Note: The foregoing Credentials should be completed and signed by the Secretary of the District's Board of Trustees and returned to the IAFPD Office at 1201 S. 6th Street, Springfield, Illinois 62703, prior to or at the time of the Annual Conference, in order to entitle the member district to participate in the Conference and meetings of the Members.**

## PROXY \_\_\_\_\_

The \_\_\_\_\_ Fire Protection District, being an active member in good standing of the Illinois Association of Fire Protection Districts (IAFPD), does herewith appoint the President of the IAFPD, or such other person as may be designated by the Executive Committee of the Board of Directors of the IAFPD, as Proxy for the Fire Protection District, with the authority to exercise all voting rights, as such Proxy, at the Annual Meeting of the Membership of the Association to be held at the I-Hotel and Conference Center, Thursday, June 19th in Champaign at any adjournment thereof. The undersigned, on behalf of the said Fire Protection District, do hereby ratify, confirm and approve any and all action taken pursuant to this Proxy. This Proxy shall revoke all prior Proxies which may have been issued by the said Fire Protection District.

- |                              |                              |
|------------------------------|------------------------------|
| _____ (Signature of Trustee) | _____ (Signature of Trustee) |
| _____ (Signature of Trustee) | _____ (Signature of Trustee) |
| _____ (Signature of Trustee) | _____ (Signature of Trustee) |
| _____ (Signature of Trustee) | _____ (Signature of Trustee) |

The undersigned certifies that he or she is the duly appointed and acting Secretary of the \_\_\_\_\_ Fire Protection District, and does herewith certify that the signatures hereto affixed above are the duly appointed or elected Trustees of the aforesaid Fire Protection District, and that this Proxy was executed by said Trustees after passage of a Resolution authorizing that act.

Date: \_\_\_\_\_, 2025 \_\_\_\_\_, Secretary

**Note: In order to make the above Proxy effective, the Board of Trustees must adopt a Resolution at a regular or properly noticed special meeting authorizing the Proxy and a majority of the members of the Board of Trustees of the Fire Protection District must sign this Proxy. It should then be returned to the Illinois Association of Fire Protection Districts, 1201 S. 6th Street, Springfield, Illinois 62703.**