**Bylaw Change Request Form Instructions: (Word)**

This form uses Microsoft Word, and can be saved on your computer and can be printed for mailing. It can be also be attached to an email and sent to the Bylaws Chairperson. PC USERS: You may have to click the “Enable Editing” tab to use this form. When you are done filling it out, you simply go to

FILE > **SAVE AS**> and save it with a **new file name**. The request form can be found on the AVVA web site.

***DO NOT USE THE TAB KEY TO MOVE FROM SPACE TO SPACE! YOU MUST CLICK YOUR CURSER INTO EACH INDIVIDUAL SPACE!***

**PERSON SUBMITTING THE REQUEST:**

In the upper right corner area, fill out your name, the date, the state and chapter you are a member of, and your email address and phone number. It is important that the Bylaws chair has a means to contact you, should there be any questions or concerns about your request.

Fill in the Article and Section number of the Bylaw that you are requesting to change.

**EXAMPLE:**

Article #: VII Section # (s): VII.7.05 & 7.06 Other Sections Affected: VIII.8.05 ( NOTE: the Bylaws use Roman Numerals, so you must use them here)

 **CURRENT LANGUAGE: PROPOSED REVISIONS: REVISED BYLAW:**

In these boxes, you need to show what the current language is, then include your proposed changes, in order to show exactly what changes you want, where they will affect the document, and then show how it will look once changed. You should be able to copy and paste, if you are familiar with that function. Here is an example. You will want to **“~~strike through~~”** any words that you intend to take out, and add with ***bold, Italic, underlined text***, any wording you want to add. EXAMPLE:

The National Membership Chair will ~~verify~~ ***confirm*** that the requesting state meets the minimal membership requirements. After ~~verification,~~ ***confirmation,*** ~~the incorporation petition~~  ***The Incorporation Packet*** will be mailed to the State Representative.

The National Membership Chair will confirm that the requesting state meets the minimal membership requirements. After confirmation, The Incorporation Packet will be mailed to the State Representative.

The National Membership Chair will verify that the requesting state meets the minimal membership requirements. After verification, the incorporation petition will be mailed to the State Representative.

\*\*\*\* TYPING BEYOND THE EXISTING BOTTOM LINE WILL AUTOMATICALLY CREATE A PAGE 2. If there is more text than will fit in the existing box it will stretch into a second page. Once you have fully filled out this form, use the “**SAVE AS**” function in your program and name the file something different. Print a copy, to mail to the address below, or simply attach it to an email it to:

Mail to: Wynella Bethards OR Email with attachment to: icejean51@twc.com

 4404 Saratoga Woods Dr.

 Louisville, KY 40299

You will be notified by the Bylaws Chair when your request has been received and what action has been, or will be, taken.

**ASSOCIATES OF VIETNAM VETERANS OF AMERICA, INC.**

**REQUEST FOR AMENDMENT – BYLAWS**

**(See instructions – page One)**

|  |  |
| --- | --- |
| Date: |  |
| Name: |  |
| State/Chapter: |  |
| Email/Phone: |  |

**---------------------------------------------------------------------------------------------------------------------------------------**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Article #: |  | Section #(s): |  | Other Article(s) Affected: |  |

 **CURRENT LANGUAGE PROPOSED REVISIONS REVISED BYLAW**

|  |  |  |
| --- | --- | --- |
|  |  |  |

Revised September 2024 F-BYL- 03.01

**JUSTIFICATION FOR CHANGE:** (To be filled in by submitting party).

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| --- |
|  |
| ***BYLAWS COMMITTEE USE ONLY:*****COMMITTEE COMMENTS/RECOMMENDATONS:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Recommend Passage as written:** (“X” in appropriate box)  | NO: |   | YES: |  |  |

**Recommend Passage With the Following Changes in Language:** |