



ASSOCIATES OF VIETNAM VETERANS OF AMERICA, INC

REQUEST TO INCORPORATE AS AN INDEPENDENT CHAPTER

This form is for use by groups of AVVA members who do not have a VVA or AVVA Chapter near them, and/or who wish to form an AVVA Chapter independent of other AVVA groups.

Committee Use Only:
Rec'd By: \_\_\_\_\_
Date: \_\_\_\_\_

We, as a group of AVVA members, request to incorporate as an independent AVVA Chapter:

Name of requester: \_\_\_\_\_ Member #: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please complete the following information:

City & State location of Chapter home: \_\_\_\_\_

Is there an existing AVVA Chapter located in this area? \_\_\_\_\_ If so, Chapter number: \_\_\_\_\_

Summarize the justification for incorporating:

Four horizontal lines for summarizing the justification for incorporating.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

All inquiries should be sent to: Bobbie Morris: bobby514@comcast.net

Mail to: Bobbie Morris, Committee Chair
155 Fairlane Drive
Industry, PA 15052