

Department of Florida



Marine Corps League, Inc

You may use your keyboard to fill out this form

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

Detachment Commandant's Name \_\_\_\_\_

Detachment Name and Number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Florida Zip \_\_\_\_\_

SUBJECT: REVISION TO DETACHMENT BYLAWS

CURRENT: (This section shall contain the current portion of your by-laws to be changed, as it currently reads)

PROPOSED CHANGE: (This section will show the change as proposed)

RATIONALE: (This section is to explain the rationale for the change)

I hereby certify that the Detachment has voted on this change and it was approved by a majority. This motion was recorded in the minutes of our meeting dated \_\_\_\_\_

Respectfully submitted,

Your signature: \_\_\_\_\_

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

Your Position: \_\_\_\_\_ (Commandant, Judge Advocate, other)

COMPLETE ALL SECTIONS: Misspelled words, improper syntax, and other grammatical errors will cause unnecessary delays. Use as many sheets as necessary.

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Submit Two Copies

Mail To: Department Judge Advocate  
Scott Westervelt  
1706 Waterford Landing Drive  
Fleming Island, FL 32003

(See attached blank page to type your current portion of the bylaw, proposed change and rationale for the change).

USE THIS PAGE TO TYPE YOUR CURRENT, PROPOSED BYLAW CHANGE AND RATIONALE:

Detachment Name and # \_\_\_\_\_

You may use your keyboard to type your proposed changes.