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633 Pennsylvania Ave NW, Washington, DC 20004 • ncnw.org • ncnwhq@ncnw.org

**NATIONAL COUNCIL OF NEGRO WOMEN, INC.  
CERTIFICATION OF ORGANIZATION OF A  
COMMUNITY-BASED OR RURAL SECTION  
AND OFFICERS THEREOF**

THIS IS TO CERTIFY that in accordance with permission granted by the National Council Women, Inc., a meeting was held at

\_\_\_\_\_ **(Location)**

on \_\_\_\_\_ at \_\_\_\_\_  
**(Date)** **(Time)**

at which an organization of the National Council of Negro Women, Inc., was organized to be known

as the \_\_\_\_\_  
Community-based Section of the National Council of Negro

Women, Inc., to have for its jurisdiction

\_\_\_\_\_ **(Community, City, or State)**

and to have its Headquarters at:

\_\_\_\_\_ **Address City State Zip Code**

I further certify that the following is a true and complete copy of a certain resolution duty adopted at such meeting:

“RESOLVED: That pursuant to the conditions contained in the “Permission to Organize a Community-based Section,” granted by the National Council of Negro Women, Inc., this Guild shall, and hereby does agree with the National Council of Negro Women, Inc., to engage in activities in conformity with the National Council of Negro Women mission, Bylaws, Handbook and all policies, procedures, rules and regulations prescribed and by the Board of Directors of the National Council of Negro Women, Inc.”

Krystal Ramseur  
Chief Administrative Officer

Dr. Mary McLeod Bethune, Founder  
Dr. Dorothy Irene Height, President Emerita

Dr. Thelma T. Daley, 8<sup>th</sup> National President and Chair

Janice L. Mathis, Esq.  
Executive Director

*Contributions are tax deductible*



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I also certify that the Section's By-Laws were duly adopted at such meeting in accordance with the National Council of Negro Women By-Laws and Handbook.

I further certify that the following are the officers of the Guild, having been duly elected to hold office until the election and qualification of their respective successors:

Name	Address	Phone	E-Mail
Chair	_____		
Vice Chair	_____		
Secretary	_____		
Treasurer	_____		

Certified by: \_\_\_\_\_

**Secretary**

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

**Thelma T. Daley**  
**8<sup>th</sup> National President & Chair**