

BUSINESS MEETING VOTING AT INNISFIL COMMUNITY CHURCH

PROXY AUTHORIZATION FORM



Proxy voting is accepted for absence due only to employment, vacation or illness.

A member is permitted to exercise a Proxy Vote for no more than ONE ABSENT MEMBER.

Voting Member's Name who will be absent: _____

I will be absent from the business meeting to be held on (Date) _____ for reasons of a) Employment _____ B) Vacation _____ C) Illness _____.

I hereby appoint _____ (name the voting member of the Assembly) to act on my behalf and place my vote by proxy.

Signature: _____ Date: _____

I accept the responsibility to Vote for the above person:

Member's Signature : _____

Date: _____