

PROXY VOTING FORM

At The Unitarian Druze Community of Victoria 2021 AGM

I, _____ of _____ (Print name of nominated "Member")

(Address) _____

Phone: _____

Hereby authorise: _____

of _____ (Print name of Proxy) (Address) _____

to act FOR AND ON MY BEHALF at the Annual General Meeting of the above Association on the _____ 29th day of March 2020.

Signed: _____

Date: _____

Authorised by: _____ Executive Committee of Unitarian Druze Community of Victoria

Signed: _____ Date: _____

(Secretary or President) Print Name: _____

Office held: Secretary / President Address: _____

Telephone: _____

This form must be received at the Association office at least 96 hours prior to the scheduled commencement of the meeting.