

**MVECA
ASSEMBLY MEETING
Limited Proxy**

I, _____, a MVECA Assembly Member, appoints the secretary of the Association or:

(PLEASE PRINT THE NAME OF YOUR PROXY HOLDER OR LEAVE BLANK IF YOUR PROXY HOLDER WILL BE THE SECRETARY OF THE ASSOCIATION)

as my proxy holder to attend the semi-annual meeting to be held on _____, at _____ via Zoom Meeting. The proxy holder named above has the authority to vote and act for me to the same extent that I would if personally present, with power of substitution, except that my proxy holder's authority is limited to the actions by vote taken on the above date only.

Signature of MVECA Assembly Member

Date

THIS PROXY IS REVOCABLE BY THE MVECA ASSEMBLY MEMBER AND IS VALID ONLY FOR THE MEETING FOR WHICH IT IS GIVEN AND ANY LAWFUL ADJOURNMENT. IN NO EVENT IS THE PROXY VALID FOR MORE THAN THE STATED DATE OF THE ASSEMBLY MEETING FOR WHICH IT WAS GIVEN.

Instructions:

Email the signed proxy form to cdavis@mveca.org or fax to 937-767-1793 before the date of the Assembly Meeting. The Administrative Assistant MUST have the signed proxy by the time the Assembly Meeting starts.