

# East Central Neighborhood Association

## Voting Proxy Form

Member's Name: \_\_\_\_\_

Address: \_\_\_\_\_

I give \_\_\_\_\_ authorization to vote on my behalf on  
all issues put to a vote by the neighborhood association during the 03-10-2022 meeting.  
Name of Proxy

Member Signature: \_\_\_\_\_

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

This form must be presented during the neighborhood association meeting at the time of voting.