

PROXY VOTE AUTHORIZATION FORM

I, _____, appoint _____
(Print Name) (Print Name)
to vote on my behalf at the congregational meeting to be held at Hope UCC, 141 S.
12th Avenue, Sturgeon Bay, Wisconsin on _____.
Date (month, day, and year)

Absentee's Signature Date (month, day, and year)

Proxy's Signature Date (month, day, and year)

The proxy must be a member of Hope UCC, attend the meeting, and vote in your stead. Proxy
vote authorization forms must be given to the Moderator before the meeting is called to order.

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