

ABATE OF OHIO, INC.

MEETING PROXY

Meeting Level: ___ State
 ___ Region ___
 ___ County _____

Meeting Date: ___ / ___ / ___

Voting Member: _____

Voting Office: _____

Proxy Holder: _____

Reason for Absence: _____

Voting Direction(s): This is a full voting proxy, except for the following directions.

Item: _____

Vote or Intent: _____

Item: _____

Vote or Intent: _____

Item: _____

Vote or Intent: _____

Item: _____

Vote or Intent: _____

Item: _____

Vote or Intent: _____

Item: _____

Vote or Intent: _____

Issues to be presented to Board:

Signature _____ Date ___ / ___ / ___

Witness _____ Witness _____

ABATE OF OHIO, INC.

MEETING PROXY

Characteristics:

1. Category: Board.
2. Established by: Constitution Article V: BOD Organization; Section 5: Proxy Requirements and Voting.
3. Purpose: To assign proxy when a voting Board member is unable to attend a Board meeting.
4. Audience: Voting Board members (BOD, RBO, CBO).
5. Required? Preferred.

Directions:

1. Meeting Level:
 - a. State – check for state level meeting.
 - b. Region – check for region level meeting. Indicate region number.
 - c. County – check for county level meeting. Indicate region number (above) and county name.
2. Meeting Date – of Board in mm/dd/yy format.
3. Voting Member – name of voting Board member.
4. Voting Office – title of voting Board office. For example, “State xxxx Director”, “Region xx Treasurer” or “xxxx County Secretary”.
5. Proxy Holder – name of member to represent voting Board office. NOTE – The Executive Director’s ability to vote as a proxy holder is limited by the ABATE Constitution.

6. Reason for Absence – For example, work schedule conflict, prior commitment, family emergency, etc.
7. Voting Directions (s):
 - a. Item – issue to be addressed by Board.
 - b. Vote or Intent – yes, no, abstain or explain intent of vote. For example, “I support Ms. xxxx for Region xx Interim Newsletter Officer”.
 - c. Attach additional directions and information as needed.
8. Issues to be presented to Board – any specific instructions for proxy holder outside of voting.
9. Signature – of voting Board member.
10. Date – of signature of voting Board member in mm/dd/yy format.
11. Witness – for use with telephone proxy only.

Special Cases:

1. Separate proxy required for each voting office.
2. Not valid for e-votes.
3. A telephone proxy should be transcribed, then witnessed and signed by two Board officers.

Handling:

1. Send to: Proxy holder and Chair of meeting.
2. Deadline: Received by start of Board meeting (preferred one day in advance).