## ADP STATE COMMITTEE MEMBER PROXY Meeting, April 22<sup>nd</sup>, 2023

A proxy must be conferred to a State Committeeperson residing in the County where the member resides. Any member residing in a Legislative District wholly within a single county shall confer the proxy to a State Committeeperson residing in the County <u>and</u> Legislative District where the member resides.

Before assigning a proxy to	someone, please co	onfirm that they will be atte	nding the n	meeting on 04/22/2023.	
State Committee Member	er:	(Print name) Affiliati		ion:	
	(Prin			On:(Print county and legislative district, if applicable	
Proxy to:			Affiliation:	(Print county and legislative district, if applicable)	
•			(Print county and legislative district, if applicable		
I hereby authorize the Stathe meeting of the Arizon			to act as	my proxy on all matters coming before	
I understand that my pro-	xy is:				
<ul><li>General</li><li>Uninstructed</li><li>Not Transferable</li><li>Irrevocable</li></ul>	(No directions (Proxy may no	(Use of proxy is unrestricted and may be applied to all votes at the meeting.) (No directions for voting. Holder of proxy determines voting choices.) (Proxy may not be assigned to a different member.) (Once submitted cannot be revoked.)			
Date:	, 2022/2023	State Committee Mo	ember:	(print name)	
Time:	_AM/PM			(signature)	
THIS PROXY MUST BE ATTEST	ED BY TWO (2) WITN	ESSES OR A NOTARY			
Subscribed an		nd sworn	to before me		
		this day of			
Witness		_			
	C	or			
Witness		Notary Public			

- You may use an online Notary service. Witnesses may observe your signing of the document via video and may provide their signatures electronically on your form.
- It is your responsibility to <u>contact and inform</u> the person to whom you have assigned your proxy.
- For this meeting, your **proxy form must be provided directly to ADP**, <u>not</u> to the person to whom you've assigned your proxy.

Your proxy must be received by the ADP no later than 5 PM, Wednesday, April 19th, 2023

Submit completed form as an attachment via email to: statecommittee@azdem.org

Or mail completed paper form to: Arizona Democratic Party, PO Box 36123, Phoenix, AZ 85067