



PROXY FORM

Name of Proxy: _____
 Address of Proxy: _____
 City: _____ County: _____
 Home Phone: (____) _____ Work Phone: (____) _____
 Email: _____

I hereby appoint the above named active Democrat from my county to serve as my proxy for the _____ meetings on this date _____ and to vote on any matters which may properly come before said meeting, with the same authority and force as if cast by me in person.

Name of Member: _____
 Address of Member: _____
 City: _____ County: _____
 Home Phone: (____) _____ Work Phone: (____) _____
 Email: _____

Signature: _____ Date: _____

Note: If the person you designate as your proxy already has a vote, then your proxy **cannot cast an additional vote for you**. Proxies are not allowed for County, District, or State Conventions (See Section 11.05 of the NCDP Plan of Organization). **If you have a proxy for a member of the Executive Council for a meeting of the Council that precedes a meeting of the State Executive Committee then you have their proxy in the absence for the State Executive Committee Meeting as well.** (See Section 4.01 of the NCDP Plan of Organization "composition" and section 11.05 of the NCDP Play of Organization "State Executive Council.")

Return to:
 North Carolina Democratic Party
 PO Box 1926
 Raleigh, NC 27602

Or email:
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