

Macomb County Master Gardener Association Proxy Ballot

I, the undersigned, hereby acknowledge that I am a member in good standing with the Macomb County Master Gardener Association (MCMGA) and that the person designated below has the authority to vote for me at the September 2024 Annual Membership Meeting.

She/He shall vote:

___ as they wish.

___ as I have designated in writing prior to the start of the meeting.

This ballot must be presented to the MCMGA Secretary no later than seven (7) days in advance of the date of the September 2024 Annual Membership Meeting or handed to the MCMGA Secretary prior to the start of the meeting.

Date:

NAME OF THE DESIGNATED VOTER: (please print)

NAME OF THE ABSENTEE VOTER: (please print)

Signature of the Absentee Voter:

Signature of the MCMGA Secretary: