

## **CJE PROXY FORM**

By way of this proxy, please allow			, Representative of Record	
		(Name)		
of Member company			, a voting member in good standing of	
the Center for Job (	Order Contracting	ß Excellence, to vote on my b	pehalf	
at the		meeting of the		
	(Date)			
(	) Committee	( ) Chapter Meeting	( ) Annual Elections Meeting	
		(Please check one)		
If Committee, spec	ify:			
If Chapter meeting,	specify chapter a	nd meeting:		
		ommittee member whom I g es invalid for the above note	ive my proxy is not in attendance for the devent and date.	
Print Name:				
Voting Member in G	Good Standing (Me	ember Entity):		
Signature:			_	
Date:				

INSTRUCTIONS: Email Proxy to the Stated Member & the Secretary (info@jocexcellence.org) NO LATER THAN <u>TWO DAYS PRIOR TO</u> the Referenced Meeting. <u>PROXY MUST BE ON FILE</u> with the Secretary PRIOR to the Meeting.

Any member voting by proxy on behalf of another member has the ethical duties of voting as per the member's instructions. Please inform your proxy the specifics of the vote you want cast on your behalf.