

SGM PROXY FORM



SGM APPOINTMENT OF PROXY

I, _____ (full name)

of _____ (address)

of _____ (email address)

being a member of Tribe FM Incorporated hereby appoint:

_____ (full name)

being a member of Tribe FM Incorporated, as my proxy to vote on my behalf at the SGM of the association to be held on the 27th October 2024 and any adjournment of that meeting.

Signature of member appointing proxy

_____ Date _____

PLEASE NOTE: A proxy vote may only be given to a eligible member of the association. Proxy must be received to the secretary by paper format or by email at secretary@tribefm.org.au by no later than 24 hours prior to meeting.