

**FEBRUARY 9, 2023 LD3 MEETING PROXY FORM**

KNOW ALL PERSONS BY THESE PRESENTS:

That I, \_\_\_\_\_,  
(Print the name of the **Precinct Committeeman** WHO IS NOT attending the meeting, the **Proxy Grantor**)

the undersigned **Precinct Committeeman (PC)** in \_\_\_\_\_ Precinct,

Legislative District 3, Maricopa County, State of Arizona, do hereby constitute and appoint:

\_\_\_\_\_  
(Print the name of the **Proxy Carrier**—elected **LD3 PC only**—in the same precinct WHO IS attending the meeting)

\_\_\_\_\_  
(Print the street address, including city, state, and zip code of the **Proxy Carrier**)

as my Attorney-in-Fact and **Proxy** to vote for me, in my name and stead, at the LD3 Meeting to be held on

**Thursday, February 9, 2023 at 8:00 PM (for District Business; credentials close at 6:50 PM)**

**Reformed Living Bible Church; 6140 East Thunderbird Road; Phoenix, AZ.**

My named Proxy is hereby appointed for the transaction of any and all business that may properly come before the meeting, and I do hereby approve, ratify, and confirm all of the acts of my named Proxy.

WITNESS my hand this \_\_\_\_\_ day of \_\_\_\_\_, 2023

SIGNED \_\_\_\_\_

(LD3 Precinct Committeeman WHO IS NOT attending the meeting, the Proxy Grantor)

**PLEASE NOTE:** The above signature of the Precinct Committeeman not attending the meeting shall be witnessed by 2 (two) individuals other than the 2 (two) principals **OR** attested to by a **Notary Public**.

\_\_\_\_\_  
WITNESS 1 Signature (Other than Proxy Grantor & Carrier)

\_\_\_\_\_  
WITNESS 2 Signature (Other than Proxy Grantor & Carrier)

\_\_\_\_\_  
WITNESS 1 Printed Name

\_\_\_\_\_  
WITNESS 2 Printed Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Phone

— **OR (NOTARY PUBLIC)** —

STATE OF ARIZONA     )  
                                      ) ss  
COUNTY OF MARICOPA )

This instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**NOTARY PUBLIC**