**Breast Cancer Support Aotearoa Inc.**

**Official Proxy Form**

**Dear Member,
Please complete this form if you cannot attend the BCS AGM Wednesday 18 September 2024, and would like to give your vote to another BCS Member.
Please select the member(s) you are nominating as your Proxy.**

I (full name),

a current Member of Breast Cancer Support Inc.,

give my Proxy Vote to: (full name)

who is a current Member of Breast Cancer Support, for the Annual General Meeting,

Wednesday 18 September 2024.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated:

**Please note:**

1. You must be a current Member of Breast Cancer Support Incorporated (BCS) in order to give your Proxy Vote to another current Member of BCS whom you select to represent you at the Annual General Meeting.
2. **Please** **complete and return the Proxy form by 5pm Friday 13 September 2024 by email to support@breastcancersupport.org.nz**

**Proxies must be nominated on this BCS Official Proxy Form. Thank you.**