PROXY VOTE FORM

RE: ANNUAL GENERAL MEETING OF HOSPICE PETERBOROUGH

TO BE HELD VIRTUALLY FROM PETERBOROUGH, ONTARIO

ON THURSDAY, JUNE 24, 2021 AT 6:30 PM

(the “AGM”)

The board of directors (the “Board”) of Hospice Peterborough wants your voice to be heard at this year’s Annual General Meeting (AGM). As a result, they are making it possible for all members to attend and all voting members to vote at the AGM in person (via Zoom) or by proxy.

The following persons are voting members of Hospice Peterborough:

(a) a Director (Board member) by virtue of his/her election or appointment to the Board;
(b) a member of a Board Committee by virtue of his/her appointment to a Committee; and
(c) a volunteer who is currently active in the affairs of the Organization as reflected by the volunteer report forms 30 days prior to the member’s meeting.

For those voting members who are unable to participate live via Zoom at the 2021 AGM, the Hospice Peterborough Bylaws allow for voting by proxy.

For the purpose of ensuring that all proxy voting is subsequently verifiable, the Board is prescribing this form of proxy to be used at the AGM.

Please email or fax this proxy form by no later than 6:30 PM on June 22, 2021 to admin@hospicepeterborough.org or 705-742-0064.

Proxy Vote Forms will not be accepted after 6:30 PM on June 22, 2021. For greater certainty, proxy vote forms will not be accepted on the date of the meeting.

This Proxy Vote Form shall only be valid in respect of this AGM or at a continuation of this AGM in the event of an adjournment.
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Re: The 2021 Annual General Meeting of the Members of Hospice Peterborough to be held on June 24th, 2021 at 6:30 PM (the “AGM”)

THE UNDERSIGNED HEREBY APPOINTS __________________________________________________, to be the proxy nominee of the undersigned to attend, vote and act for and on behalf of the undersigned at the AGM, and at any adjournment of the AGM for the sole purpose of all matters that come before the AGM.

____________________________________
Date

____________________________________
Signature of Member

____________________________________
Name of Member – please print

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