

ASSOCIATION OF FAMILY HEALTH TEAMS OF ONTARIO
(the "Association")

ANNUAL GENERAL MEETING OF MEMBERS

Westin Harbour Castle, 1 Harbour Square, Toronto, Ontario

Commencing 8:30 AM on Thursday, September 19, 2019 and ending at any adjournment thereof

PROXY

I, _____
(please print Member's name)

am a Member of the Association in good standing and entitled to vote.

I will be unable to attend the above-noted meeting of the Association and hereby designate the following individual to vote at this meeting on my behalf:

[please check one]

- ☐ the Chair of the Board of the Association
- ☐ the following individual who need not be a Member of the Association

(name of proxy)

Signature: _____

Name of organization: _____

Date: _____

NOTES:

- (1) The Votes represented by this Proxy will be voted, or withheld from being voted, in accordance with the instructions noted hereon, on any ballot requested or required by law. **THIS PROXY CONFERS AUTHORITY FOR THE ABOVE-NAMED TO VOTE IN HIS/HER DISCRETION WITH RESPECT TO AMENDMENTS OR VARIATIONS TO THE MATTERS IDENTIFIED IN THE NOTICE OF THE MEETING ACCOMPANYING THIS PROXY OR OTHER MATTERS WHICH MAY PROPERLY COME BEFORE THE MEETING.**
- (2) **THE PERSON (S) DESIGNATED IN THIS FORM OF PROXY IS A MEMBER OF AFHTO. EACH MEMBER HAS THE RIGHT TO APPOINT A PERSON TO REPRESENT HIM/HER AT THE MEETING OTHER THAN THE PERSON SPECIFIED ABOVE.** Such right may be exercised by inserting, in the blank space provided, the name of the person to be appointed.
- (3) **PLEASE DATE THE PROXY.** If this Proxy is not dated in the blank space provided in this form it is deemed to bear the date on which it was mailed and/or electronically mailed by the persons making the solicitation. This Proxy must be executed by the Member ED or Board Chair or his/her designate duly authorized.
- (4) **THIS PROXY MUST BE SENT TO THE SECRETARY OF THE ASSOCIATION OF FAMILY HEALTH TEAMS OF ONTARIO 48 HOURS BEFORE THE AGM ON SEPTEMBER 19, 2019** (The forty-eight (48) hours does not include Saturdays, Sundays and statutory holidays).

***This form must be submitted to the Secretary of the Association,
Clarys Tirel, through delegation to AFHTO CEO by email at
kavita.mehta@afhto.ca or fax 416-920-6556 at least 48 hours
before the AGM start date.***