



College of
**TRADITIONAL
CHINESE MEDICINE
PRACTITIONERS +
ACUPUNCTURISTS**
of British Columbia

900-200 Granville Street
Vancouver, BC, V6C 1S4
ctcma.bc.ca

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PROXY

Please note that in accordance with CTCMA Bylaw 39 (6) & (8), the form of proxy must be duly completed and delivered to the registrar of the CTCMA at least six (6) days prior to the date of a General Meeting. A proxy holder shall not vote more than three (3) proxies at the meeting. The original signatures are required on all proxies delivered to the College. Scanned, emailed or faxed copies are not accepted.

For Completion by Registrant Giving a Proxy

As a CTCMA Registrant entitled to vote at a general meeting, by signing this form, I appoint the Registrant whose name and signature are contained below, as my Proxy Holder.

I, _____, Registration #: _____,

hereby appoint the Proxy Holder named below, to vote at the annual general meeting in my absence.

SIGNED this _____ day of _____, 20____.

(Signature of Registrant giving a proxy)

For Completion by Proxy Holder

As a Proxy Holder for the above registrant, I confirm that I attend at and vote for the above registrant as their appointed Proxy Holder

_____, Registration #: _____,

(Proxy Holder to print name and registration number)

of _____.

(print address of Proxy Holder)

As Proxy Holder for the undersigned I agree to be appointed and may attend and vote on behalf of the above named Registrant at the annual general meeting of the College to be held on the 22nd day of September, 2019 and at any adjournment of that meeting.

SIGNED this _____ day of _____, 20____.

(Signature of Proxy Holder)

INSTRUCTIONS

The original signatures are required on all proxies delivered to the College. Scanned, emailed or faxed copies are not accepted.

Registrant Giving a Proxy

1. Complete your name and registration number then sign and date the portion marked 'For Completion by Registrant Giving a Proxy'
2. Mail the Proxy to a College registrant who agrees to be appointed by you to attend the Annual General Meeting to vote on your behalf

Proxy Holder

1. Complete your name, registration number and address then sign and date the portion marked 'For Completion by Proxy Holder'
2. Mail, courier or hand deliver the Proxy to the College on or before **September 16, 2019** at the following address:

CTCMA
Annual General Meeting Proxy
900 – 200 Granville Street,
Vancouver, BC V6C 1S4

說明

委託投票表單必須持有簽名正本。不接受掃描、電子郵件或傳真副本。

委任代表投票的中醫師

1. 於 'For Completion by Registrant Giving a Proxy' 部分填上姓名、註冊號碼、然後簽名及寫上日期
2. 郵寄到一名同意代表您投票的註冊中醫師

被委任代表投票的中醫師

1. 於 'For Completion by Proxy Holder' 部分填上姓名、註冊號碼及地址、然後簽名及寫上日期
2. 於 2019 年 9 月 16 日之前郵寄到中醫針灸管理局以下地址：

CTCMA
Annual General Meeting Proxy
900 – 200 Granville Street,
Vancouver, BC V6C 1S4