

**Georgia Mutual Aid Group
Extended/ Annual Proxy**

Member Organization _____

1. This Extended/ Annual proxy is solicited on behalf of the Executive Board of Directors of the Georgia Mutual Aid Group, from those Members of the Board of Directors who will or may be unable to physically attend or provide an authorized delegate at any scheduled GMAG Annual or Quarterly Statewide meeting during the 12 (twelve) month period following the date of signing this form.

2. The undersigned hereby appoints the Executive Board, collectively, as proxy with the power of substitution to vote as the undersigned Member of the Board of Directors at scheduled Annual or Quarterly Statewide meetings of the Board of Directors or any adjournment dates thereof.

3. In their discretion the Proxy is authorized to vote upon business as may properly come before scheduled Annual or Quarterly meetings. This proxy may be withdrawn by submitting a written notice to a Member of the Executive Board, who will then provide it to the Secretary. This proxy will be suspended and superseded at any meeting for which a Director or his/ her authorized representative is physically present at the meeting. At the end of the 12 (twelve) month period following the date of signing this proxy form will automatically renew annually unless withdrawn as described above.

Signed _____ Date _____

Name _____ Title _____

////////////////////////////////////Follow Instructions Below to Submit Proxy////////////////////////////////////

Respective Directors are requested to:

- a. Identify their organization at the top of this page.
- b. Sign and complete the signature block in the middle of this page.
- c. Fax or Email this page to: **David Trussell, Secretary**

Mail to: GFSTC Attn: David Trussell

**1000 Indian Springs Dr
Forsyth, Georgia 31029
Office: 478-993-4521 Fax: 478-993-4511
Email: chief101@windstream.net
Questions???? Call David Trussell**