Proxy Voting Form CONIFA Annual General Meeting 2020
25.01.2020, Saint Helier, Jersey

CONIFA Member entitled to vote

I/we hereby authorize ___________________________________________(Name/Association) to serve as my/our proxy and vote on my/our behalf at the CONIFA Annual General Meeting (AGM) to be held on 25th January 2020 in Saint Helier, Jersey.

1. ☐ I/we wish to unreservedly leave the right to take any decisions to take to my/our proxy.
2. ☐ I/we advise our proxy to vote as follows, after due consideration of all documents at hand:

   §5 Approval of the Minutes of the AGM 2019: ☐ approved ☐ reject
   §7 Approval of the Financial Statement 2019: ☐ approved ☐ reject
   §8 Freedom of Responsibility 2019: ☐ approved ☐ reject
   §10 Approval of the Budget 2020: ☐ approved ☐ reject
   §11 Admission for Membership: Mapuche ☐ approved ☐ reject
   Rapa Nui ☐ approved ☐ reject
   West Papua ☐ approved ☐ reject
   §13 Approval of New Constitution and Internal Regulations:
      Conflict of Interest Policy ☐ approved ☐ reject
   §14 Admission of Honorary Members: Bako Sahakyan ☐ approved ☐ reject
   §15 Election of CONIFA Executive Committee Members:
      Vice-President: Kristof Wenczel ☐ approved ☐ reject
      Vice-President: Dimitri Pagava ☐ approved ☐ reject
      General Secretary: Sascha Düerkop ☐ approved ☐ reject
      Jens Jockel ☐ approved ☐ reject
      Justin Walley ☐ approved ☐ reject
      Paul Watson ☐ approved ☐ reject
      Kelly Lindsay ☐ approved ☐ reject
      Rene Jacobi ☐ approved ☐ reject
      Alberto Rischio ☐ approved ☐ reject
      Noah Wheelock ☐ approved ☐ reject
      Ben Schultz ☐ approved ☐ reject
      Saifeen Kanabe ☐ approved ☐ reject
      Busani Sibindi ☐ approved ☐ reject
      Orcun Kamali ☐ approved ☐ reject

If you checked box 2:
Should the discussions during the AGM present new information/evidence/arguments on any of above points, I/we advise our proxy to:

   a. ☐ Call me/us on __________________, while we ensure we will be available.
   b. ☐ Change our expressed wish as stated above on her/his/its own consideration.

__________________________________________________________
Date, Name, (Position within Association), Signature