MT. SHASTA FOREST PROPERTY OWNERS' ASSOCIATION, INC.

DELIVERY ADDRESS: 424 MAIN ST, SUITE C MCCLOUD CA 96057

msfpoa.ofcsec@gmail.com msfpoa.com 530-964-2111



MT SHASTA FOREST POA PROXY AUTHORIZATION

	Date:
FROM: MEMBER'S PRINTED NAME	
LOT NUMBER(S):	
This is to certify that the undersigned, a voting member of N	Mt Shasta Forest POA, has designated
as his or her representativ	ve to cast all votes and express all approvals
or disapprovals that said member be entitled to cast or expre	ess at the annual meeting of Mt Shasta
Forest POA and any lawfully adjourned meeting, thereof, fo	or all purposes provided by the Articles of
Incorporation, By-Laws and the annual meeting call of Mt S	Shasta Forest POA.
In no event shall this proxy be valid for a period longer than 1 st meeting for which it is given. This proxy shall be revocal undersigned voting member.	• • • • • • • • • • • • • • • • • • • •
MEMBER SIGNATURE	