



PROXY VOTING FORM

To: Election Chairman Date: _____, 2019
 From: _____
 Chapter: _____

This is to authorize _____, a registered delegate of the 23rd DSAP National Convention, a member of the Chapter, to vote for in my behalf . Thank you and more power to DSAP!

 Signature of DSAP member

SUBSCRIBED AND SWORN to before me this ___ of _____ 2019 at _____ affiant exhibiting to me her Community Tax Certificate No. _____ issued at _____, _____

Doc No. _____
 Page No. _____
 Book No. _____
 Series of: _____