

PROXY FORM

**CARDIOLOGY TECHNOLOGISTS
ASSOCIATION OF NOVA SCOTIA**



**Cardiology Technologists Association of Nova Scotia Annual General Meeting held May 5th, 2024,
at Dartmouth General Hospital, Dartmouth, NS.**

I, (name, CTANS #) _____ being a member in good standing of the Canadian Society of Cardiology Technologists (CSCT) who is entitled to attend and vote, hereby appoint the chair of the meeting or the name provided here: _____ to act as my proxy at the meeting on my behalf and vote in accordance with the following directions.

Please check “FOR” or “AGAINST” as applicable, for each of the following items. Mark your vote with an X.

Ordinary Business	For	Against
Item A: Approval of the Agenda Motion to approve the Agenda for the current AGM, as circulated.		
Item B: Approval of Minutes 2023 AGM Motion to approve the Minutes of the 2023 AGM, as circulated		
Item C: Destruction of 2023 AGM Proxies Motion to destroy the 2023 AGM Proxies		
Item D: Election for Technology Director for a term ending at the AGM in 2024 and any other matters that may properly arise at the AGM. Choose FOR, for either Option A or Option B		
Option A: In the event that I have provided specific instructions and any amendments or additional issues arise, my proxy holder may vote on my behalf on any such new issues, amendments and/or elections, in any manner as the proxy holder sees fit.		
Option B: In the event that I have provided specific instructions and any amendments or additional issues arise, my proxy holder shall abstain from voting on my behalf.		

***I acknowledge that this proxy will be acted upon unless revoked by me in writing or by my attendance at the meeting. Proxies are to be forwarded to the Registrar (lindsay@ctans.ca) by education day, May 4th, 2024.**

Signature of Voting Member: _____

Date: _____