

Australian Acoustical Society

ABN 28 000 712 658

Queensland Division

PO Box 760 Spring Hill Qld 4004

Proxy Nomination Form

| I, | Name: | |
|--|---------------------|-----|
| of | Address: | |
| being a | Membership Grade | z*· |
| of the Society, Appoint | | |
| | | |
| | Name: | |
| of | Address: | |
| as my proxy vote for me at the <u>2015</u> Annual General Meeting of the Queensland Division of the Australian Acoustical Society. | | |
| | Signature: Date: | |
| Note: *Fellows, Members, and any Divisional Committee member eligible to vote or appoint a proxy. | | |
| This forms must either be emailed or faxed to the Secretary October 20, 2015 or presented at the meeting when called for by the AGM Chair. | | |
| For any questions please contact the AAS Secretary (Qld) Richard Devereux (rdevereux@acran.com.au) | | |