

**Old Lyme Shores Beach Association (“Association”)**

**LIMITED PROXY**

**for the [Insert Date], 202\_\_ Association Meeting**

I, the undersigned owner, hereby appoint \_\_\_\_\_ as my proxy (or if the space above is left blank, the undersigned hereby appoints the Secretary of the Association, on behalf of the Board of Governors), with full powers of substitution, for all matters to come before the meeting of the Association and any adjournment thereof to be held on \_\_\_\_\_, 202\_\_, in person at \_\_\_\_\_, Old Lyme, CT 06371. I hereby authorize and instruct my proxyholder to use his/her best judgment on all matters which properly come before the meeting and for which a general proxy may be used, with the authority to act for me to the same extent as if I were personally present.

THIS PROXY IS REVOCABLE BY THE OWNER VIA WRITTEN NOTICE TO THE SECRETARY OF THE ASSOCIATION, AND IS VALID FOR ONLY THE MEETING DESIGNATED ABOVE AND ANY LAWFUL ADJOURNMENT. IN NO EVENT IS THIS PROXY VALID FOR MORE THAN NINETY (90) DAYS AFTER THE ORIGINAL DATE OF THE MEETING FOR WHICH IT WAS GIVEN.

DATED this \_\_\_ day of \_\_\_\_\_, 202\_.

Print or Type Name of Owner: \_\_\_\_\_

Street No. and Name: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_ day of \_\_\_\_\_, 202\_.

\_\_\_\_\_  
Signature of the Notary Public/  
Commissioner of the Superior Court

Date Commission Expires: \_\_\_\_\_

Printed Name of Notary Public \_\_\_\_\_

---

**This section is to be completed by only the proxyholder named above, if he/she wishes to appoint a substitute proxyholder.**

**SUBSTITUTION OF PROXY**

The undersigned, appointed as proxyholder above, does hereby designate and appoint \_\_\_\_\_  
\_\_\_\_\_ to substitute for me in the proxy set forth above.

Print or Type Name of Original Proxyholder: \_\_\_\_\_

Signature of Original Proxyholder: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_ day of \_\_\_\_\_, 202\_.

\_\_\_\_\_  
Signature of the Notary Public/  
Commissioner of the Superior Court

Date Commission Expires: \_\_\_\_\_

Printed Name of Notary Public \_\_\_\_\_