



Statement of Proxy

Association Name: _____

Date of Meeting: _____

I/We, _____ the legal Member(s) of
_____ Homeowners
Association, Inc. hereby grant my proxy to:

_____ Board Member, or if blank, the President
of the Board of Directors or in case of his absence the Vice President.

OR

_____ Other

For the sole purpose of casting my vote on all matters that might be
presented to the Membership for a vote at the meeting stated above being
held on _____ (date) at _____ (time) or any adjournment or
postponement thereof.

The proxy will be revoked if you appear in person.

Home Address _____

Owner Mailing Address (s) _____

Owner Phone # _____

Signature: _____

Print Name: _____

**THE COMPLETED PROXY MUST BE BROUGHT TO THE MEETING OR SUBMITTED VIA
ONE OF THE METHODS BELOW**

JSN Property Management, LLC.
PO BOX 101627
Denver, CO 80250

Phone: 303-482-2213
Fax: 303-495-5895
Email: ClientServices@jsnproperty.co

