

Indiana Republican State Committee Precinct / Vice Precinct Committeeman Proxy Appointment Form PX-5 (August 2024)

l,	, of	County,
Name of Committeeman	County of Resident	ce
Indiana Precinct	, do hereby appoint	/
Precinct of Res	idence	Name of Proxy
who is a qualified primary Repub	lican, to serve as my true and lawful pro	oxy, and to vote for me
in my name and stead a the mee	ting of Cou	inty Republican Party to
	County of Residence	
be held on	<u>_</u> .	
Date of Meeting		

I understand that the appointed proxy will be required to show proof of identification upon entry into the meeting of the County Republican Party. I understand that this proxy may not be revoked after it is filed and will become void after the adjournment of the meeting.

Signature of Committeeman

Date