



TOWN OF INUVIK

MUNICIPAL ELECTION 2021

APPLICATION TO AUTHORIZE PROXY VOTER

I, _____ of INUVIK, being eligible to vote at the election
(Applicant - Print Name)

In INUVIK, and having reason to believe that I will be unable to vote either at an Advance Vote held on DATE or on Election Day, hereby authorize

(Name of Proxy Voter)

to vote on my behalf as a Proxy Voter at this election.

I have not authorized any other person to act as my Proxy Voter at this election.

Signature – PROXY VOTER

Signature - APPLICANT

Signature - Returning Officer (UPON RETURN)