

## **DESIGNATION OF AUTHORIZED REPRESENTATIVE FOR NON-INDIVIDUAL MEMBERS**

### **Community Savings Credit Union – 2026 Directors Election**

The individual named below is hereby authorized to vote on behalf of the undersigned member in the 2026 Community Savings Credit Union directors election.

Print Full Legal Name of Authorized Representative: \_\_\_\_\_

#### **Member Information:**

Name of member: \_\_\_\_\_

Membership number: \_\_\_\_\_

Name of authorized signer of member: \_\_\_\_\_

Signature of authorized signer of member: \_\_\_\_\_

Date: \_\_\_\_\_

**Please submit the completed form to [agm@comsavings.com](mailto:agm@comsavings.com) or drop off the completed form at a branch of Community Savings Credit Union during branch hours before 5:00 PM on January 12, 2026.**

**Please note that the individual appointed as Authorized Representative cannot be a member of Community Savings Credit Union.**