

## Proxy Voting Form 2025

**THIS FORM MUST BE LODGED WITH THE PiCSA SECRETARY AT [secretary@picsa.org.au](mailto:secretary@picsa.org.au)  
by close of business Monday 27<sup>th</sup> October, 2025**

### Professionals in Cardiac Sciences Australia Inc Annual General Meeting

I, \_\_\_\_\_ (NAME)

of \_\_\_\_\_ (ADDRESS)

being a member of Professionals in Cardiac Sciences Australia Inc,

appoint \_\_\_\_\_ (NAME)

of \_\_\_\_\_ (ADDRESS)

being a member of Professionals in Cardiac Sciences Australia Inc,

as my proxy vote for me on my behalf at the Annual General Meeting of Professionals in Cardiac Sciences Australia Inc to be held on **Tuesday 28<sup>th</sup> October, 2025** and at any adjournment of that meeting.

Choose one (1) of the following options below:

☐

I authorise my proxy to vote on my behalf at their discretion; OR

☐

I authorise my proxy to vote in relation to the following resolutions or matters as follows (Set out specific instructions to your proxy concerning how to vote in relation to particular resolutions or matters).

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PROFESSIONALS in  
CARDIAC SCIENCES  
AUSTRALIA Inc.

PiCSA Members Email Address: \_\_\_\_\_

Signature of PiCSA Member: \_\_\_\_\_ Dated: \_\_\_\_\_