



WAYSHOWERS COMMUNITY FELLOWSHIP

PROXY FORM 2013

I DESIGNATE _____ TO ACT
ON MY BEHALF IN ALL MATTERS RELATED TO WCFC. This
proxy is in effect until it is revoked in writing by me or until it expires
eleven months from the date of signature below.

Signed: _____ Date: _____

Member's Printed Name: _____

Address: _____

Phone: _____

E-Mail: _____

Proxy's Printed Name: _____

Address: _____

Phone: _____

E-Mail: _____

Note: An original proxy form may be carried or mailed to arrive
BEFORE July 6, 2013 to:

WCFC Secretary
1447 Hwy 69 North
Osceola, IA 50213

Form may also be faxed to:
1-866-591-5163

Note: Do NOT mail proxy to PO Box address below.

Office note: Proxy received on _____ By _____

It's The Spirit That Unites Us!

Wayshowers Community Fellowship Corporation
P O Box 4925
Washington, DC 20008