Irving Street Towers Condominiums Proxy Form

(Please be sure to fill in your unit numbers)

I/We the undersigned do hereby attest I/we are the owner(s) of unit number(s) _____ and I/we do hereby appoint the following Proxy valid only for the Irvington Place Condominiums Annual Homeowners Meeting to be held on December 3, 2024 and any lawful adjournments thereof.

I/We understand if I/we present myself/ourselves at the registration desk at the Meeting and sign the roster, this Proxy shall be rendered null and void and will be returned to me/us. I/We further understand this Proxy is not transferable.

I/We also understand if I/we return this Proxy signed and dated but do not check any of the boxes below my/our Proxy will be used for establishment of quorum only.

CHECK ONE BOX ONLY

[]	•	ectors, with the power of substitution if the irector present in alphabetical order, as my/our orum ONLY.	
[]	Chairperson is not present to another D true and lawful attorney to act as my/our	ectors, with the power of substitution if the irector present in alphabetical order, as my/our Proxy. I/We understand all Proxies received shall g all Board of Directors members present.	
[]	to act as my/our proxy. (The person appointe must be present at the meeting in order to vote.)		
IN WIT	NESS WHEREOF, I/we have executed this P	roxy on this day of, 2024.	
	(PLEASE PRINT OWNER'S NAME)	(PLEASE PRINT OWNER'S NAME)	
(SIGNA	TURE OF OWNER)	(SIGNATURE OF OWNER)	

Please return this Proxy to CMI whether you plan to attend the Meeting or not. If you do attend the Meeting, your Proxy will be returned to you. Proxies are kept on file for a period of 1 year from date of Meeting & will be destroyed after that time.

Return to: CMI, 2105 SE 9th Ave, Portland, OR 97214 or Sydneyc@communitymgt.com.



Irving Street Towers Condominiums Nomination Form for Election of Directors

I/We would like to place the following names into nomination for election to the Board of Directors. In accordance with the Association documents, each nominee must be a legal owner reflected on the title deed at Irvington Place Condominiums.

NAME OF OWNER	ı	ADDRESS AND TELEPHONE NUMBER(S)
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NOTE:

- 1. You may use this form to nominate someone to the Board and/or to place your own name into nomination.
- 2. Please return this completed form to CMI either via mail at 2105 SE 9th Ave, Portland, OR, 97214 or via email to Sydneyc@communitymgt.com.

