

JACKSON ENERGY COOPERATIVE

VOTING PROXY

I _____, name _____ to be my proxy, to vote in my place and on my behalf as though I were voting, at the annual business meeting of Jackson Energy Cooperative on October 17, 2024, hereby revoking all previous proxies.

Member Printed Name: _____

Member Address: _____

Last 4-Digits of Member Social Security Number: XXX-XX-_____

Member Account Number: _____

Member Signature: _____

Date Signed: _____

I hereby declare under penalty of perjury that the above information is true and correct to the best of my knowledge and belief and authorization has been granted.

Proxy Holder Name: _____

Proxy Holder Signature: _____

All the above information is required. Any proxy that does not have the above-requested information will not be accepted.

One proxy equals one vote. Limit three proxies per Jackson Energy membership.

FOR OFFICE USE ONLY:	
_____	_____
AUTHORIZED JE SIGNATURE	DATE