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PROXY FORM

KNOW ALL PERSONS BY THESE PRESENT THAT I _____
(Name)

_____ OF _____ do hereby constitute and appoint
(Title) (Company)

_____ or in his/her absence the Manager of the Plan as my attorney and
(Name of proxy)

agent and attorney and agent for said company, in my name, place, and stead to vote as proxy at the next Biennial Meeting of the Ohio Automobile Insurance Plan, to be held on the twenty-fifth (25th) Day of October, 2022, and/or such date or dates to which such meeting may be adjourned, hereby giving to such attorney and agent power and authority to act conclusively for such company on all questions which may duly come before such meeting as fully as I could act if I were personally present.

IN WITNESS WHEREOF, I have hereunto subscribed my name and title and the name of said company, this _____ day of _____, 2022.

SIGNATURE

TITLE

COMPANY

E-Mail Address: _____