



Horseshoe Springs Association

REQUEST TO CAST VOTE BY EMAIL

Date: _____

Member Name: _____

Member Cabin Address: _____ Jemez, Springs, NM 87025

I _____ do hereby request the HSA Secretary allow

my vote for the _____ (annual or special) meeting to be held on

(date) _____ be approved to be cast by email.

Member Signature _____

Secretary Signature _____

Date: _____