



COUNTY OF BERKS
2025 MUNICIPAL ELECTION
PROXY DESIGNATION FORM

I, _____, candidate for the office of
(Name of Candidate)
_____ hereby appoint
(Name of Office)
_____ as my proxy for the sole purpose of
(Name of the Candidate's Proxy)
appearing before the Board of Election and drawing to break the tie for the above listed office.

Sworn to and subscribed before me this

_____ day of
_____, 2025

Signature

Official Title

Signature of Candidate

_____ Office _____ District

Street Address

Post Office/Zip Code

My Commission Expires:
