**NOTES ON APPOINTMENT OF PROXY AND VOTING RIGHTS**

1. Only registered members who have paid their annual dues as at 15 August 2020, can exercise voting rights at the Annual General Meeting (AGM).
2. As a **PAID-UP** member, you should attend the meeting and vote, or you may appoint a proxy to attend the meeting on your behalf. A proxy appointment does not have to be a paid-up member of the Association. (Please advise us of your proxy appointment).
3. A single proxy exercises all voting rights on behalf of a paid-up member.
4. If more than one proxy is appointed, either proxy may vote on a show of hands.
5. A proxy form must be signed by the paid-up member (electronic signatures will be accepted)
6. Proxies will only be valid and accepted by the Association if the form appointing the proxy is forwarded to the Association prior to the start of the meeting. You may, also, present the proxy form by delivering it via email to xlcrpsasecretariat@yahoo.com on or before 15 August 2020.
7. If you return the form without directing the proxy on how to vote on a particular matter, please note that the proxy will vote as he or she deems fit.

**EXCELSIOR PAST STUDENTS ASSOCIATION LIMITED**

### Proxy Voting Form for Annual General Meeting

**SECTION 1: MEMBER DETAILS (please print clearly)**

|  |  |
| --- | --- |
| Full name: |  |
| Full address: |  |
| E-mail address: |  |

#### SECTION 2: APPOINTMENT OF PROXY

 I appoint\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full name Full address

as my proxy to exercise my vote at the Annual General Meeting of the Excelsior Past Students Association Limited to be held on *August 15, 2020,* and at any adjournment of that meeting. If the person I have appointed is unable to be my proxy, I will appoint:

Full name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Full address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION 3: VOTING INSTRUCTIONS**

I direct my proxy to vote in the following manner: (Tick the box that applies)

|  |  |  |  |
| --- | --- | --- | --- |
| **MOTION** | **TYPE OF RESOLUTION** | **FOR** | **AGAINST** |
| 1.That the Minutes be Confirmed | Ordinary |  |  |
| 2. That the Financial Statements and other reports be accepted | Ordinary |  |  |
| 3. That the body elects the following as members of the Council:President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Vice President: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Treasurer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Director : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Director :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Director:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Director:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Director:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ordinary |  |  |

Signed by Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_