



**INSURANCE INSTITUTE  
VERSEKERINGSINSTITUUT**  
NORTHERN GAUTENG • NOORD GAUTENG

Telephone: 0832871017      email: secretary@iing.co.za

**FORM OF PROXY**

I/We.....(Name)

Of.....(Company)

Hereby appoint..... (Name)

Or failing him/her, the President of the Institute as our proxy to attend, speak and vote for us on our behalf at the Special General Meeting of the Insurance Institute of Northern Gauteng on **20 March 2014** and any adjournment of that meeting.

**VOTING INSTRUCTIONS**

Our proxy is hereby instructed to use this form only for the purpose of voting as indicated on the following matters: Indicate by means of a X

Matter	For	Against	Abstain
Confirmation of the minutes of 48 <sup>th</sup> AGM			
Acceptance of 2014 Financial statements			
Reappointment of the auditors for 2014/15			
Nomination and election of Council Members: Candidate:			

Please ensure nomination forms was submitted on time for your nominated candidate to be valid.

Signed this.....Day of.....2013

SIGNATURE.....

For and behalf of.....