



## FORM OF PROXY

I, (full name) \_\_\_\_\_

Membership Number \_\_\_\_\_

being a valid member of the Scheme, do hereby appoint

(Name of appointee) \_\_\_\_\_

or failing him/her, the Chairperson of the meeting, as my proxy to vote for me and on my behalf as indicated below, at the Annual General Meeting of the Scheme to be held at the offices of Nampak SA Medical Scheme, Imbizo Boardroom, Nampak Centre, 114 Dennis Road, Atholl Gardens, Sandton on Wednesday, 23 June 2010 and any adjournments thereof.

**Resolution No. 1** (Refer to item 2 of the Agenda)

My vote ✓

IN FAVOUR	<input type="checkbox"/>
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AGAINST	<input type="checkbox"/>
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**Resolution No. 2** (Refer to item 3 of the Agenda)

My vote ✓

IN FAVOUR	<input type="checkbox"/>
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AGAINST	<input type="checkbox"/>
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**Resolution No. 3** (Refer to item 5 of the Agenda)

My vote ✓

IN FAVOUR	<input type="checkbox"/>
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AGAINST	<input type="checkbox"/>
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Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 2010

**This proxy must reach the Secretaries, for the attention of Lallie Govender (Fund Manager), by means of return mail, hand delivery to 1-3 Canegate Road, La Lucia Ridge or fax to (031) 580-0455 by no later than 15 June 2010 or may be returned to the Board of Trustees on 23 June 2010 at the abovementioned venue.**