

APPOINTMENT OF PROXY FORM

If you cannot attend the Annual General Meeting of the Botswana Public Officers' Medical Aid Scheme (BPOMAS) to be held on the **28TH November 2017 at 14:00HRS at Boipuso Hall, Fairgrounds, Gaborone**, and you are entitled to vote at the Annual General Meeting, you may appoint a proxy to vote on your behalf. This proxy only applies to the Annual General Meeting, and any adjournment of that meeting.

A. YOUR DETAILS

FULL NAMES

MEMBERSHIP NO.

POSTAL ADDRESS EMAIL

B. WHO DO YOU WANT TO APPOINT AS YOUR PROXY

I appoint as my proxy (tick one (1) box only):

Chairperson of the Annual General Meeting

If you appoint the Chairperson as your proxy, and direct the Chairperson on how to vote, the Chairperson must call a poll on that vote and must vote the way you direct.

OR

The following person

If you want to appoint someone else, give their details. If you do not provide a name, you will be taken to have appointed the Chairperson as your proxy.

FULL NAMES

MEMBERSHIP NO.

POSTAL ADDRESS

EMAIL ADDRESS

Only tick the appropriate box if you want to direct your proxy how to vote. If you mark the ABSTAIN box, you are directing your proxy not to vote at the Annual General Meeting and your vote will not be counted when calculating whether the required majority of members have passed the resolution.

Item 1: Adoption of the Audited Financial Statements for the year ended 31 March 2017

YES		NO		ABSTAIN	
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Item 2: Appointment of external auditors

YES		NO		ABSTAIN	
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Item 3: Adoption of the report of the Management Committee to members for the year ended 31 March 2017

YES		NO		ABSTAIN	
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DATE: _____ SIGNATURE: _____

*A proxy nomination shall only be given to a member of the Scheme.

*The instrument appointing the proxy must be deposited at the office of the Administrators of the Scheme at the under mentioned address; not later than 24hrs before the time for holding the Annual General Meeting. AFA House, Plot 61918, Showgrounds Office Park, P O Box 1212, Gaborone, Tel: 365 0540, Fax: 3951165