

Proxy Voting Form 20 February 2016

Proxy votes shall be applicable to fully paid up members of at least 12 months standing (2015 period) who are unable to attend the AGM in person.

The proxy shall be a member of the CFSA and entitled to vote at such meeting

l,		the unde	rsigned, being a full	y paid-up mei	mber of	f the CFS/	A for at least 12	
months do	hereby appoint		, who is	a fully paid-up	memb	er of the C	CFSA and will be	
attending th	e Annual General Me	eting of the CFSA on	Saturday 20 Februa	ry 2016 to act	t as my	proxy to v	ote on my behalf	
as he/she s	ees fit.							
The proxy s	shall vote in the manne	er provided by the Co	enstitution as they this	nk fit in all resp	pect of a	all busines	s on the Agenda	
requiring a	vote to be taken by sh	ow of hands or by ba	allot.					
Full name:								
	ess:							
			Tel/cel number:					
I am a fully	paid up member of the	e following club(s):						
CCC	FFC	GCC	KZNCC	NO	CS			
Signature: _			Date:					
	ansfer my proxy to vo	•						
TO BE COI	MPLETED BY THE PI	ROXY HOLDER:						
Full name:								
	ess:							
ID Number				Tel/cel number:				
I am a fully	paid up member of the	e following club(s):						
CCC	FFC	GCC	KZNCC	1	NCS			
Signature:			Date:					