

Proxy form

I,, membership number _ _ _ _ _

being a member of the TFG Medical Aid Scheme, appoint:

Mr/Ms, membership number _ _ _ _ _

or failing him or her, the Chairperson of the meeting, to attend, speak and vote for me at the Annual General Meeting held in The Auditorium, Stanley Lewis Centre, Voortrekker Road, Parow East, on 26 June 2019, at 11:30, and at any adjournment thereof.

1. Agenda item 2: To approve the Minutes of the Annual General Meeting held on 21 June 2018.

My vote X	In favour		Against	
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2. Agenda item 3: To adopt the Annual Report of the Chairperson of the Board for the year ended December 2018.

My vote X	In favour		Against	
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3. Agenda item 4: To adopt the Annual Financial Statements for the year ended 31 December 2018.

My vote X	In favour		Against	
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4. Agenda item 5.1: To appoint the External Auditors for the ensuing year.

My vote X	In favour		Against	
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5. Agenda item 5.2: Trustees Election and confirmation of the Board of Trustees.

My vote X	In favour		Against	
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Signed on the day of May/June 2019

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SIGNATURE OF MEMBER

The proxy form must be completed and returned to: The Fund Manager, Ms Elma Fourie, Postnet Suite 116, Private Bag X19, Milnerton, 7435, or email to tfgmasagm@discovery.co.za or fax to 021 527 1946, or handed to the Principal Officer on 18 June 2019, 17:00 latest.