



Australian Institute of Credit Management
Western Australia Division

Appointment of Proxy

I, _____
(Surname) (First Name) (Middle Initial) Member No.

of _____

a financial member of the above Institute, hereby appoint:
the Chairman of the Meeting (cross out if not applicable)
or,

_____ (Surname) (First Name) (Middle Initial) Member No.

of _____
(a financial member entitled to vote and attend the meeting),

as my proxy to vote for me and on my behalf at the Australian Institute of Credit Management, Western Australia Division Council Meeting to be held on Friday, 14 July 2017, and at any adjournment thereof.

Dated this _____ day of _____ 2017

Signature _____

*** Notes ***

1. Unless otherwise instructed in writing, the proxy may vote as he or she thinks fit, and
2. the instrument appointing him or her (to act as Proxy, Power of Attorney or other) must be deposited with the AICM Office, 3/1-9 Chandos Street St Leonards NSW 2065 (48) hours prior to the commencement of the meeting.