**THE SOUTHERN AFRICAN INSTITUTE FOR BUSINESS ACCOUNTANTS NPC**

**REGISTRATION NUMBER:** [**1990**](http://www.cipro.co.za/ccc/DocListA.asp?T1=M1999019752&T2=1999/019752/07)**/005364/08**

**(“SAIBA”)**

**PROXY FORM**

###### I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(NAME/S IN BLOCK LETTERS)*

###### of *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(ADDRESS IN BLOCK LETTERS),*

e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being a voting member of SAIBA in good standing with membership number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby appoint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (identity number / SAIBA membership number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_), or failing him/her, the chairperson of the annual general meeting, as my / our proxy to vote on my / our behalf at the annual general meeting of SAIBA to be held by electronic communication on Thursday, 28 July 2022, at 17h00 for the purpose of considering, and if deemed fit, passing, with or without modification, the resolutions to be proposed at the meeting, and at any adjournment thereof, and to vote for or against the resolutions or to abstain from voting in accordance with the following instructions:

|  |  |  |  |
| --- | --- | --- | --- |
| **Resolution** | **In favour of** | **Against** | **Abstain** |
| ORDINARY RESOLUTION NUMBER 1 – MINUTES  |  |  |  |
| ORDINARY RESOLUTION NUMBER 2 – PRESENTATION OF AUDITED ANNUAL FINANCIAL STATEMENTS |  |  |  |
| ORDINARY RESOLUTION NUMBER 3 – APPOINTMENT OF AUDITORS |  |  |  |
| ORDINARY RESOLUTION NUMBER 4 – ENDORSEMENT OF SAIBA’S REMUNERATION POLICY |  |  |  |
| SPECIAL RESOLUTION NUMBER 1 – AMENDMENT OF MEMORANDUM OF INCORPORATION: CHANGE OF NAME  |  |  |  |
| SPECIAL RESOLUTION NUMBER 2 – AMENDMENT OF MEMORANDUM OF INCORPORATION: DESIGNATIONS  |  |  |  |

*Indicate how you wish your vote to be cast by way of a tick / cross in the spaces provided above.*

Unless otherwise instructed as above, my proxy may vote as he / she thinks fit.

Signed on this ………………day of………………………………..2022

………………………………………..

*SIGNATURE*

***Notes:***

1. *Membership numbers may be obtained from the SAIBA Membership Department on (012) 643 1800.*
2. *Documentary evidence establishing the authority of a person signing this proxy form in a representative capacity must be attached to this proxy form.*
3. *All signed proxy forms must be delivered to SAIBA by e-mail to* saiba@saiba.org.za *as soon as possible, but in any event before the proxy exercises any rights of a member at the meeting.* *The proxy will not be valid unless you are in good standing and the proxy is received by SAIBA as aforesaid prior to the meeting.*
4. *A member may appoint one person of his / her choice as proxy by inserting the name of such person in the space provided. Any such proxy need not be a member of SAIBA. The member may insert the name of the proxy in the space provided, with or without deleting the words “the chairperson of the annual general meeting”. In the event that no name is indicated, the proxy shall be exercised by the chairperson.*
5. *Unless revoked, this proxy shall remain valid until the end of the meeting, even if the meeting or part thereof is postponed or adjourned.*
6. *If a member gives contradictory instructions in relation to any matter or any additional resolution(s) are properly put before the meeting, the proxy shall be entitled to vote or abstain from voting, as he thinks fit, in relation to that resolution or matter. If, however, the member has provided further written instructions which accompany this form and which indicate how the proxy should vote or abstain from voting in any of the circumstances referred to above, the proxy shall comply with those instructions.*
7. *Any alteration to this proxy form, save for the completion of any bank spaces, must be initialed by the signatory.*