

PROXY FORM

I.....

Being a financial member of Ostomy Association of South Australia and entitled to vote at the AGM and General Meetings hereby appoint:

Heather Walsh, Association President

or failing her the Secretary....Tracy Turner

to be my proxy at the 2019 Annual General Meeting and at all General Meetings held during the 2019/2020 financial year.

I authorize my proxy to vote at such meetings at her discretion in respect of all motions or other business conducted at the meetings.

This proxy is signed by me.

Signature of member.....

Dated.....

Membership Number (if known).....

Return address : President of Ostomy Association of South Australia Inc.

1 Keele Place

Kidman Park. SA 5025