



Proxy Voting Form

I, (name and surname) _____

being a fully paid-up:

- Professional member
- Associate member
- Affiliate member

of PSASA, hereby appoint

(name and surname) _____

who is also a fully paid-up:

- Professional member
- Associate member
- Affiliate member

of PSASA, to cast my vote at the Annual General Meeting of the PSASA on 2 April 2025.

- I confirm that this is an Open Proxy that will allow my proxy to vote as they feel fit within the following conditions:

Signed at _____ this _____ day of _____ 2025

Signature _____