

The Hungerford & Associated Families Society Inc

[INC 9877065]

(Rule 33 (1))

FORM OF APPOINTMENT OF PROXY

| I,(full name) |
|-----------------------------------------------------------------------------------------------------------------------|
| of |
| I,(full name) |
| of |
| My proxy is authorised to vote in favour of/against all/these (delete as appropriate) resolution(s) (insert details). |
| |
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| |
| to be inserted if desired. |
| |
| Signature of member appointing proxy |
| Date |

NOTE: A proxy vote may not be given to a person who is not a member of the Association.