Annual General Meeting- Proxy Form

To be returned by Thursday 20 November 2025
By Email: agm@nswstoma.org.au

I, _____, being a member of **NSW Stoma Ltd** and entitled to attend and vote hereby appoint:

☐ The Chairman of the meeting (mark box)

Or if you are NOT appointing the Chairman of the meeting as your proxy, please write the name and email of the person you are appointing as your proxy (an email will be sent to your appointed proxy with details on how to access the virtual meeting)

Name:

Email:

Voting Direction

Proxies will only be valid and accepted by the Company if they are signed and received no later than 48hours before the Meeting. Please mark any of the boxes with an [x]

Resolution

1. To approve the minutes from the 2024 AGM.

For	Against	Abstain*
☐	☐	☐

2. To approve the 2024-2025 audited accounts.

For	Against	Abstain*
☐	☐	☐

3. To accept the Constitutional changes as published

For	Against	Abstain*
☐	☐	☐

**If you mark the Abstain box, you are directing your proxy not to vote on your behalf on a poll or show of hands and your vote will not be counted in computing the required majority on a poll.*

Full name of member:
Signature of member:
NSW Stoma Ltd Member number: