

PROXY FORM

Name and postal address of creditor in full

_____ Limited (In Liquidation)

I, appoint _____

(1) to be my proxy from _____ to _____ (term not to exceed 12 months)

or

(2) to be my proxy to vote at the meeting of creditors to be held on:

the _____ day of _____ 20____, ____am/pm or at any adjournment thereof.

Dated this _____ day of _____ 20__

Signed: _____

The proxy form when signed must be lodged with the Liquidator not less than two working days before the start of the meeting.