

VIFMH EBA MEETING

February 2017

PROXY VOTING FORM

I, _____ of _____
(Name)

being an employee of Victorian Institute of Forensic Mental Health, hereby appoint

_____ of _____
(Name)

as my proxy to vote for me on my behalf at the Meeting to be held at Thomas Embling Hospital onFebruary 2017 at 1pm,

Signed this _____ day of _____ 2017

Signature _____

Witness _____

I instruct my proxy to vote in favour of the Agreement

I instruct my proxy to vote Against the Agreement

I instruct my proxy to vote to abstain from voting

I instruct my proxy to vote as she/ he determines on my behalf

All proxies must be provided at the start of the meeting and the number held advised to the meeting.