



PROXY FORM

1. Member Details

I, the undersigned:

- Full Name: _____
- Address: _____
- Phone: _____
- Email: _____

being a financial member of APPVA, hereby appoint:

2. Proxy Appointment

Proxy's Full Name: _____

to act as my proxy at the Annual General Meeting (AGM) to be held on:

Date: 13 September 2026 Time: 1500rsLocation: Canberra

and at any adjournment thereof.

3. Voting Instructions

(You may direct your proxy on how to vote. If left blank, the proxy may vote as they see fit.)

Election of Board Members (3 positions)

☐ I direct my proxy to vote as follows:

- 1.
- 2.
- 3.

☐ I give my proxy discretion to vote on all election matters.

4. Member Signature

I confirm that this proxy appointment is valid and complies with the rules of [Organisation Name].

- Member Signature: _____
- Date: _____

5. Submission Instructions

Proxy forms must be received no later than:

Deadline: 1700hrs 12 September 2026

Submit To: Company Secretary e: mark.horner@peacekeepers.asn.au

6. Office Use Only

- Date Received: _____
- Received By: _____
- Member Eligibility Confirmed: ☐ Yes ☐ No
- Notes: _____