PROXY FORM

I_____of _____
(*Full Name*) (*Address*)
being a Member of the Retirement Scheme for the Members of The City of Kingston Co-operative Credit Union (the Retirement Scheme) HEREBY appoint

_____
(*Full Name of Proxy*)
of _____or failing him/her the person whom I have selected (Place a tick before the name) from amongst those persons listed below:

CHECK	NAME
	Mr. Courtney Wynter
	Mr. Trevor Blake
	Mr. Garth O'Sullivan
	Ambassador Aloun Ndombet-Assamba

as my Proxy, to vote for me and on my behalf at the Annual General Meeting of the Retirement Scheme to be held on **Wednesday, June 28th, 2017, at 5:00 p.m.,** in the **Carter Hall, Holy Cross Parish Church, 77 Half Way Tree Road, Kingston 10,** St. Andrew and at any adjournments thereof.

Please indicate with an X in the spaces below how you wish your votes to be cast.

RESOLUTIONS	FOR	AGAINST
Resolution No. 1 **RESOLVED** that the name of the Retirement Scheme be changed from "**The Retirement Scheme of the Members of City of Kingston Co-operative Credit Union Limited"** to **"COK Sodality Co-operative Credit Union Limited Retirement Scheme"** and that recital 1 of the Trust Deed and the Rules be amended accordingly.		
Resolution No. 2 **RESOLVED** that the Trust Deed be amended to extend membership in the Retirement Scheme to members of Co-operative Societies registered under the Co-operative Societies Act of Jamaica. That such members need not be a member of COK Sodality Co-operative Credit Union Limited ('the Sponsor') and that recital 1 of the Trust Deed and the Rules be amended to include number (iv.) Which shall read as follows: *(iv.)"are members of a Co-operative Society registered under the Co-operative Societies Act of Jamaica and, for the avoidance of doubt, such a member need not be a Member of the Sponsor."*		

DATED this day of 2017.

_____
Member's Signature

NB. A Member who is entitled to attend and vote at the Annual General Meeting may appoint a proxy to attend and vote on his/her behalf. A proxy need not be a Member of the Retirement Scheme. To be valid this form of Proxy must be lodged by Friday **June 23, 2017** to any Branch of COK Sodality Co-operative Credit Union Limited or sent by facsimile to: (876) 929-8048 or by electronic mail in PDF to Pensions@cokcu.com.