

PROXY FORM

Shareholder / Member No. _____

The Corporation Secretary
Kenya Reinsurance Corporation Limited
15th Floor, Reinsurance Plaza Building
Taifa Road
P.O. Box 30271-00100
NAIROBI

I/WE _____ of _____

being a *member/members of KENYA REINSURANCE CORPORATION LIMITED, hereby appoint

_____ of _____

or failing him/her _____ of _____

as *my/our proxy to vote for *me/us on *my/our behalf at the Annual General Meeting of the Company to be held at the Kenyatta Convention Centre, City Hall Way, Nairobi, on Friday, 26th June 2015 at 11.00 a.m., and at any adjournment thereof.

Signature(s) _____

Signed this _____ day of _____ 2015.

This form is to be used * in favour of/against a resolution up for voting. Unless otherwise instructed, the proxy will vote as he/she thinks fit.

* Strike out whichever is not desired.

Notes:

1. The address should be that shown in the register of members.
2. In the case of a member being a Corporation, this form of proxy must be executed either under its Common Seal or signed on its behalf by an attorney or officer of the Corporation duly authorized.
3. A person appointed to act as a proxy need not be a member of the Company.
4. In case of joint holders, the signature of any one holder will be sufficient but the names of all joint holders should be stated.

Shareholder's Admission Letter for AGM on 26th June 2015

Please complete this form and note that it must be produced at the Annual General Meeting by you or your proxy in order to record attendance. Kindly note that only the registered shareholders or their proxy notified to the Company not less than forty eight (48) hours before the time for holding the meeting will be admitted to the meeting.

Name: _____ Signature(s): _____

Annual General Meeting of Kenya Reinsurance Corporation Limited to be held at the Kenyatta Convention Centre, City Hall Way, Nairobi, on Friday, 26th June 2015 at 11.00 a.m.

FOMU YA UWAKILISHI

Nambari ya Mwenyehisa / Mwanachama _____

Katibu wa Shirika
Kenya Reinsurance Corporation Limited
Orofa ya 15, Jumba la Reinsurance Plaza
Taifa Road
S.L.P 30271-00100
NAIROBI

Mimi/ Sisi _____ wa _____

Kama *mwanachama/wanachama wa shirika la KENYA REINSURANCE CORPORATION LIMITED, ninamteua/tunamteua

_____ wa _____

Au kutomteua _____ wa _____

kama mwakilishi/wawakilishi wangu/wetu ili kupiga kura kwa niaba yangu/yetu katika Mkutano Mkuu wa Mwaka wa Kampuni utakaofanyika katika Jumba la Mikutano ya Kimataifa la Kenyatta (KICC), mkabala na barabara ya City Hall Way, Nairobi siku ya Ijumaa, tarehe 26 Juni 2015 kuanzia saa tano asubuhi (5), ama katika siku nyingineyo ile iwapo mkutano utaahirishwa.

Saini _____

hii imetiwa saini _____ siku ya _____ 2015.

Fomu hii itumiwe *kwa ajili ya/dhidi ya maamuzi kuhusu upigaji kura. Isipokuwa kwa maagizo tofauti, mwakilishi atapiga kura anavyoona inafaa.

*Ondoa chochote ambacho hakihitajiki.

FAHAMU:

1. Anwani iwe ile iliyoonyeshwa katika sajili ya wanachama.
2. Katika hali ambapo mwanachama ni Shirika, lazima fomu hii ya uwakilishi iandaliwe ama kwa idhini ya muhuri rasmi wa shirika hilo au itiwe saini kwa niaba yake na afisa wa kisheria wa shirika hilo aliyeidhinishwa.
3. Si lazima mwakilishi huyo awe mwanachama wa Kampuni hii.
4. Iwapo watakuwa washirika, saini ya mmojawapo wa mshirika itatosha lakini lazima majina ya washirika wote yaonyeshwe.

Barua ya Kukubalika kwa Mwenyehisa katika Mkutano Mkuu wa Mwaka mnamo tarehe 26 Juni 2015

Tafadhali jaza fomu hii na ufahamu kuwa lazima uionyeshwe wewe binafsi ama mwakilishi wako katika Mkutano Mkuu wa Mwaka ili mahudhurio yako yarekodiwe. Tafadhali fahamu kuwa ni wenyehisa waliosajiliwa pekee au wawakilishi waliojulishwa kwa Kampuni katika muda usiopungua saa arobaini na nane (48) kabla ya muda wa kufanyika mkutano watakubaliwa katika mkutano huo.

Jina: _____

Saini (s): _____

Mkutano Mkuu wa Mwaka wa shirika la Kenya Reinsurance Corporation Limited utafanyika katika Jumba la Mikutano ya Kimataifa la Kenyatta, mkabala na barabara ya City Hall Way, Nairobi, Ijumaa, tarehe 26 Juni 2015 saa tano asubuhi (5).