

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 **Bomas of Kenya, Lang'ata Road, Nairobi, on Thursday, 21st June 2018 at 11.00 a.m.**, and at any adjournment thereof.

Signature(s) _____

Signed this _____ day of _____ 2018.

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 21st June 2018

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 Bomas of Kenya, off-Langata Road, Nairobi, on Thursday, 21st June 2018 at 11.00 a.m.

FOMU YA UWAKILISHI

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**,
ninamchagua/tunamchagua

_____ wa _____

Au kwa kumkosa _____ wa _____

Kama mwakilishi wangu/wetu ili kunipigia/kutupigia kura kwa niaba yangu/yetu katika Mkutano Mkuu wa Mwaka wa Shirika utakaofanyika katika ukumbi wa Bomas of Kenya, barabara ya Langáta Road, Nairobi, siku ya Alhamisi, tarehe 21 Juni 2018 saa tano asubuhi, na kuarishwa kokote kunakoweza kutokea.

Sahihi _____

Ilitiwa sahihi siku ya _____ 2018.

Fomu hii itatumika pale ambapo/ dhidi ya maamuzi yatakayotolewa wakati wa upigaji kura. Isipokuwa vinginevyo itakavyoshauriwa, mwakilishi atapiga kura jinsi ambavyo angependa.

*Ondoa kile kisichotakikana.

Tanbihi

1. Anwani iwe ile iliyoonyeshwa kwenye sajili ya wanachama.
2. Pale ambapo mwanachama atakuwa Shirika, fomu hii ya uwakilishi lazima ishughulikiwe kulingana na Mhuri Rasmi au itiwe sahihi kwa niaba ya shiriki hilo na wakili au afisa wa Shirika hili aliyeidhinishwa.
3. Mtu aliyeteuliwa kuwakilisha si lazima awe mwanachama wa Kampuni hii.
4. Iwapo pana hali ambayo aliyechaguliwa ni mshirika wa pamoja, sahihi ya mshirika mmoja itatosha lakini majina ya washirika wote lazima yatajwe.

Barua ya Kuwakaribisha WenyeHisa kwa Mkutano Mkuu wa Mwaka tarehe 21 Juni 2018

Tafadhali jaza fomu hii na ufahamu kuwa sharti itolewe nawe binafsi au uwakilishi wako katika Mkutano Mkuu wa Mwaka ili usajiliwe kama aiyehudhuria. Tafadhali fahamu kuwa ni wenyeHisa waliosajiliwa pekee au wawakilishi wao waliojulishwa kwa Shirika hili katika muda usiopungua saa arobaini na nane (48) kabla ya muda wa kufanyika kwa mkutano ndio watakaokubaliwa kwenye mkutano huo.

Jina: _____ Sahihi: _____

Mkutano Mkuu wa Mwaka wa shirika la Kenya Reinsurance Corporation Limited utakaofanyika katika Ukumbi wa **Bomas of Kenya, kando ya Langáta Road, siku ya Alhamisi tarehe 21 Juni 2018** saa tano asubuhi.