DATE:		
TO: Khalsa Credit Uı	nion,	Branch
Account No:		
Account Nan	ne:	
Appointment	of voting representative	e for
Incorp	porated Company	
Limite	ed Partnership	
Assoc	iations	
officer(s) of the above acc	ount, do hereby author	, the undersigned, as the authorized signing orize to the Annual General Meeting on May 4, 2025.
The representative is not a once for voting representat	_	lsa Credit Union and can be nominated only
Name of Representative who	will vote	:
Driving License No./Citizenship No./Passport No.		:
Address of Representative		:
Signed:		
Authorized Signing Officer		Representative (by signing, you also confirm you are not a voting member of Khalsa Credit Union and is nominated only once for voting)

Authorized Signing Officer