**Proxy Form (Rule 6.7 & 6.8)**

Company Secretary  
People With Disability Australia Ltd

ACN 621 720 143

Email: pwd@pwd.org.au

Facsimile: 02 9318 1372

Post: PO Box 666, Strawberry Hills, NSW, 2021

Hand delivery by arrangement: Please call 1800 422 015

|  |
| --- |
| I/We1 |
| of |
| being a member of People with Disability Australia Ltd ACN 621 720 143 (**Company**) and entitled to attend and vote, hereby appoint 2 |
|  |
| of 2 |
| or if no person is named or failing such appointment the chairperson of the meeting as my/our proxy to act generally and vote for me/us on my/our behalf at the meeting of the Company to be held at 6pm on **10 November 2021** via Zoom videoconferencing and at any adjournment thereof in the manner indicated below or, in the absence of indication, as they think fit.  1 Insert name and address of member  2 Insert name and address of proxy |

Instructions as to voting on the motions

***You must complete this section.*** ***If you do not complete this section, your named proxy is given the discretion as to how to vote on the Motions referred to in the Notice.  If you do not complete this section, and if you do not name a proxy or if any proxies default to the chairperson, the chairperson intends to vote in favour of each Motion.***

The proxy is to vote on the Motions referred to in the Notice as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | For | Against | Abstain |
| Motion 1: | Acceptance of Apologies and Proxies |  |  |  |
| Motion 2.1: | Confirmation of Minutes |  |  |  |
| Motion 3.1: | Approval and adoption of President’s Report |  |  |  |
| Motion 3.2: | Approval and adoption of Treasurer’s Report |  |  |  |
| Motion 3.3: | Approval and adoption of Audited Financial Statements |  |  |  |
| Motion 4: | Appointment of Auditors |  |  |  |
| Motion 5.1: | Approval and adoption of Report from Returning Officer |  |  |  |
| Motion 5.2: | Approval of the appointment of Samantha Connor as Board Director in accordance with the Returning Officers Report. |  |  |  |
| Motion 5.3: | Approval of the appointment of Kelly Cox as Board Director in accordance with the Returning Officers Report. |  |  |  |
| Motion 5.4: | Approval of the appointment of Clare Gibellini as Board Director in accordance with the Returning Officers Report. |  |  |  |
| Motion 5.5: | Approval of the appointment of Dan Graham as Board Director in accordance with the Returning Officers Report. |  |  |  |

\* If you mark the Abstain box for a motion, you are directing your proxy holder not to vote on your behalf on a poll, and your vote/s will not be counted when working out the required majority on a poll.

**Authorised signature/s**

This section ***must*** be signed in accordance with the instructions below to enable your voting instructions to be implemented.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***If you are an Individual Member:*** |  |  |  |  |
|  |  |  |  |  |
| Signature of Member |  |  |  |  |
|  |  |  |  |  |
| Contact Name |  | Contact Daytime Telephone |  | Date |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***If you are an Organisational Member:*** | | |  |  |
|  |  |  |  |  |
| Signature of Director |  | Signature of Director/ Company Secretary |  |  |
| Contact Name |  | Contact Daytime Telephone |  | Date |

**Proxy Notes**

A Member entitled to attend and vote at the meeting may appoint a person as the Member's proxy to attend and vote for the Member at that meeting. A proxy may, but need not be, a Member of the Company.

You must sign this form as follows in the spaces provided:

|  |  |
| --- | --- |
| Individual Member | please sign where indicated. |
| Organisational Member: | a Director can sign jointly with another Director or a Company Secretary. A sole Director who is also a sole Company Secretary can also sign. Please indicate the office held by signing in the appropriate space. |
| Power of Attorney: | if signed under a Power of Attorney, you must have already lodged it with the registry, or alternatively, attach a certified photocopy of the Power of Attorney to this proxy form when you return it. |

Hard copy proxy forms (and the power of attorney or other authority, if any, under which the proxy form is signed) or a copy or facsimile which appears on its face to be an authentic copy of the proxy form (and the power of attorney or other authority) must be deposited at or received by email **to** [pwd@pwd.org.au](mailto:pwd@pwd.org.au)**,** by post to PO Box 666, Strawberry Hills NSW 2012, by facsimile transmission on 02 9318 1372, or by hand delivery by arrangement no later than 6pm (Eastern Daylight Time)on **Tuesday 9 November 2021** being 24 hours prior to the time of commencement of the meeting.