



Raimondi Alumni Association Limited

(hereafter known as “the Association”)

Proxy

We being members of the above-named Association:

	Name of member	Email Address of member	Year of Graduation/ Leaving	Form (e.g. S5/ S7)	Signature of member
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hereby appoint (Name) _____, (Year of Grad/ Leaving) _____, (Form (e.g. S5/S7)) _____. as our proxy to vote at the Annual General Meeting of Members to be held at Conference Room, 2/F, Raimondi College, Robinson Road on 15 December 2018 at 1:00pm and at any adjournment thereof.

Dated this day of