KINTAMPO RURAL BANK LIMITED

PROXY AUTHORIZATION FORM

I/We	of
	Agency, being (a) shareholders(s) of
KINTAMPO RURAL BANK LIMITED, hereby a	ppoint;
Name	as
a proxy at the 32 ND ANNUAL GENERAL MEET	NG of shareholders of the Bank to be held at the Wesley
Methodist Church, Kintampo on Saturday, Jul	y 29, 2017 at 10:00 am prompt and at any adjournment
thereon.	
REQU	<u>UIREMENTS</u>
Shareholder's information	Proxy Holder's Information
ID Type:	ID Type:
ID Number:	ID Number:
House Address:	House Address:
Telephone:	Telephone:
Email Address (if any)	Email Address (if any)
Signed on the day of	
(Shareholder's Signature / Thumbprint)	(Proxy Holder's Signature / Thumbprint)
later than Forty Eight (48) hours prior to	ecretary, KINTAMPO RURAL BANK LIMITED, not the time of the meeting. Proxy Form must be accompanied by a resolution for
	OFFICE USE
Signature:	Date & Stamp