



## PROXY FORM – DISCRETIONARY AUTHORITY

1. I, \_\_\_\_\_, (the “Undersigned”) being a Regular Member of the Pharmacists’ Association of Newfoundland and Labrador Inc. (the “Corporation”) who is registered in the \_\_\_\_\_ Zone, here by appoints \_\_\_\_\_ (the “Proxy Holder”) as the proxy of the Undersigned to attend at the Annual General Meeting of Members of the Corporation to be held on the 22<sup>rd</sup> day of September, 2018 and at any adjournment thereof and to vote for and on behalf of the Undersigned in any manner as the Proxy Holder, in his or her absolute discretion may see fit, all in the same manner and to the same extent and with the same power as the Undersigned could do if the Undersigned were personally present at the meeting, with the following exceptions: this proxy may not be used in respect of an election of council members nor with respect to the appointment of auditors of the Corporation.
2. This instrument of proxy will not be valid unless it is dated and signed by a Regular Member or by his Attorney duly authorized by him in writing. If an Attorney for a member executes the instrument of proxy, the instrument so empowering the Attorney, or a notarial copy thereof, should accompany the proxy instrument. The Regular Member, or his or her Attorney, as applicable, must initial any alteration or correction made to this instrument of proxy.
3. To be effective, the original instrument of proxy must be delivered to the Executive Director of the Corporation no later than the commencement of the meeting in respect of which the proxy was granted.
4. This instrument of proxy may be revoked in any manner permitted by the Corporations Act (Newfoundland and Labrador). The Undersigned hereby revokes any proxy previously given.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 2018

\_\_\_\_\_  
Signature of Member

\_\_\_\_\_  
Membership Number