



Green Cross Health Limited

## Lodge your proxy



Online  
[www.investorvote.co.nz](http://www.investorvote.co.nz)



By Mail  
Computershare Investor Services Limited  
Private Bag 92119, Auckland 1142, New Zealand

## For all enquiries contact



+64 9 488 8777



[corporateactions@computershare.co.nz](mailto:corporateactions@computershare.co.nz)

## Proxy/Voting Form



[www.investorvote.co.nz](http://www.investorvote.co.nz)

Lodge your proxy online, 24 hours a day, 7 days a week:

Smartphone?

Scan the QR code to vote now.

### Your secure access information

#### Control Number:

#### CSN/Securityholder Number:

**PLEASE NOTE:** You will need your CSN/Securityholder Number and postcode or country of residence (if outside New Zealand) to securely access InvestorVote and then follow the prompts to appoint your proxy and exercise your vote online.



**For your proxy to be effective it must be received by 2:30pm on Tuesday, 30 July 2024**

## How to Vote on Items of Business

All your securities will be voted in accordance with your directions.

### Appointment of Proxy

As a shareholder you may attend the meeting and vote, or you may appoint a proxy to attend the meeting and vote on your behalf. A proxy can be any person of the shareholder's choice and does not have to be a shareholder. The Chair, or any other Director, is willing to act as a proxy for any shareholder who wishes to appoint him or her for that purpose. Any undirected votes in respect of a resolution, where the Chair or any other Director is appointed proxy, will be voted in favour of the relevant resolution, other than when he or she is prohibited from voting on that resolution. To appoint a proxy, please enter the name of your proxy in the space allocated in 'Step 1' overleaf of this form. If you do not name a person as your proxy or your named proxy does not attend the meeting, the Chair will be appointed your proxy and will vote in accordance with your express direction (subject to any voting prohibitions), and any undirected votes will be voted in accordance with the Chair's discretion.

### Voting of your holding

Direct your proxy how to vote or give the proxy discretion as to how to vote on the resolutions by completing FOR, AGAINST, ABSTAIN or PROXY DISCRETION box on 'Step 2' overleaf. If the form is returned without a direction as to how the proxy shall act on a resolution the proxy will exercise the proxy's discretion as to whether to vote and, if so, how.

### If you propose to ATTEND the Annual Meeting:

Bring this admission card, proxy form and voting instructions/ballot paper to the share registry at the entrance to the meeting.

### If you do NOT propose to attend the Annual Meeting:

Please complete and sign the proxy and voting instruction sections in 'Step 1' and 'Step 2' overleaf of this form, sign the form and return it to the share registrar.

## Signing Instructions for Postal Forms

### Individual

Where a shareholder is an individual, this Voting/Proxy Form must be signed by you or someone you authorise to sign for you.

### Joint Holding

Where the holding is in more than one name, all of the shareholders should sign (on behalf of all shareholders). In the case of joint shareholders, if the shareholders appoint different proxies, the vote of the proxy appointed by the first shareholder will be counted.

### Power of Attorney

If the form is signed under a power of attorney, a certificate of non-revocation must be completed and a certified copy of the power of attorney must be produced to the company unless it has already been noted by the company.

### Companies

This form must be signed by a duly authorised Director or duly authorised officer or attorney. Please sign in the appropriate place and indicate the office held.

**Go online to vote, or turn over to complete the form**

# Proxy/Corporate Representative Form

## @ Elect Electronic Communications

Want to receive your communications quickly? Elect electronic communications by providing your email address below

Email Address \_\_\_\_\_  
(By providing an email address above it is acknowledged that all communications for my portfolio will be received electronically where offered)

## STEP 1 Appoint a Proxy to Vote on Your Behalf

I/We being a shareholder/s of Green Cross Health Limited

hereby appoint \_\_\_\_\_ of \_\_\_\_\_

or failing him/her \_\_\_\_\_ of \_\_\_\_\_

as my/our proxy to act generally at the meeting on my/our behalf and to vote in accordance with the following directions at the **Annual Meeting of Shareholders of Green Cross Health Limited to be held at 2:30pm Thursday, 1 August 2024, at the Ellerslie Event Centre, 80 Ascot Avenue, Greenlane, Auckland** and at any adjournment of that meeting and as my proxy thinks fit on any additional resolution or amendment to resolutions so as to give effect to my/our intention as set out below where possible.

## STEP 2 Voting Instructions/Voting Form

**Please note:** If you mark the Abstain box for an item, you are directing your proxy not to vote on your behalf and your votes will not be counted. Unless otherwise instructed, the proxy will vote as he/she thinks fit.

| Ordinary Resolutions   | For                      | Against                  | Abstain                  | Proxy Discretion         |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. That Peter Merton be re-elected as a Director of the Company.                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. That Ken Orr be re-elected as a Director of the Company.                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. To authorise the Directors to fix the remuneration of the Auditor for the ensuing year. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## SIGN Signature of Securityholder(s) This section must be completed.

Securityholder 1  
\_\_\_\_\_

Securityholder 2  
\_\_\_\_\_

Securityholder 3  
\_\_\_\_\_

or Sole Director/Director

or Director (if more than one)

Contact Name \_\_\_\_\_ Contact Daytime Telephone \_\_\_\_\_ Date \_\_\_\_\_

## ATTENDANCE SLIP



Annual Meeting of Shareholders of Green Cross Health Limited to be held at 2:30pm, Thursday, 1 August 2024, at the Ellerslie Event Centre, 80 Ascot Avenue, Greenlane, Auckland.