

# Lodge your postal vote or proxy

Online

www.investorvote.co.nz



By Mail

Computershare Investor Services Limited Private Bag 92119 Auckland 1142 New Zealand



By Fax

+64 9 488 8787

# For all enquiries contact

**M** 

+64 9 488 8777



corporateactions@computershare.co.nz

# **Proxy/Voting Form**



# www.investorvote.co.nz

Lodge your vote or appoint 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 postal vote or proxy to be effective it must be received by Computershare by 2:00 pm on Wednesday 11 December 2019

# Notes

You may cast your vote in one of the three ways described below. You may abstain from voting on one or more of the resolutions.

# (1) Casting a postal vote

As a shareholder entitled to vote at the Annual Meeting you are entitled to vote by postal vote. The Company's share registrar, Computershare Investor Services Limited, has been authorised by the Board to receive and count postal votes at the Annual Meeting.

You can cast your postal vote online at www.investorvote.co.nz or by completing the FOR, AGAINST or ABSTAIN boxes in 'Step 1' overleaf, signing this Proxy/Voting Form and returning it to the share registrar in accordance with the instructions above.

# (2) Appointing a proxy

As a shareholder entitled to vote at the Annual Meeting, you are entitled to appoint a proxy, or in the case of a corporate shareholder, a representative, to attend and, if you have not cast a postal vote, vote on your behalf. A proxy need not be a shareholder.

If you mark any of the PROXY DISCRETION boxes you must appoint a proxy for your vote to be counted.

If you cast a postal vote, you may also appoint a proxy to attend the meeting on your behalf by completing the YES box under the heading "Other Matters" in 'Step 1' overleaf. The Chair of the meeting is willing to act as proxy for any shareholder who wishes to appoint him for that purpose and intends to vote proxies marked PROXY DISCRETION in favour of all Resolutions.

You may appoint your proxy online at www.investorvote.co.nz or by completing the relevant sections of 'Step 1' and 'Step 2' overleaf, signing this Proxy/Voting Form and returning it to the share registrar in accordance with the instructions above.

### (3) Attending and voting in person

You should bring this Proxy/Voting Form to the meeting and hand the attendance slip to the share registry at the entrance to the meeting.

# **Signing Instructions for Postal Forms**

### Individual

Where the holding is in one name, the securityholder must sign.

### Joint Holding

Where the holding is in more than one name, all of the securityholders should sign.

# **Power of Attorney**

If this Proxy/Voting Form has been signed under a power of attorney, a copy of the power of attorney (unless already deposited with the Company) and a signed certificate of non-revocation of the power of attorney must be produced to the Company with this Proxy/Voting Form.

### Companies

This Proxy/Voting Form must be signed by a duly authorised officer or attorney of the company. Persons who sign on behalf of a company must be acting with the company's express or implied authority. Please sign in the appropriate place and indicate the office held.

### **Comments & Questions**

If you have any comments or questions for the Company, please write them on a separate sheet of paper and return with this form.

STEP 1	Voting Instructions/Votin	ng Form							
Please note: If you do not plan to attend the meeting, you may cast a postal vote or appoint a proxy to vote on your behalf at the meeting.									
Business						For	Against	Proxy Discretion	Abstain
Resolution 1	Election of Peter Cullinane.								
Resolution 2									$\mathbb{H}$
Resolution 3	To authorise the Directors to	fix the fees and e	xpenses of the Auditor.			H			
Resolution 4		of the Company I Meeting, and re	be revoked and a new con ferred to in the explanator						
Other Mat	ters								
	I wish to appoint a proxy to a	ttend the meeting	g on my behalf.					NO	YES
	ry will be attending the meeting romation is not provided, we canno						nd email	address).	
Proxy contact Details (Phone):		and (Email):							
<ol> <li>If you mark any of the FOR, AGAINST or ABSTAIN boxes, your vote will be counted as a postal vote.</li> <li>If you return this Proxy/Voting Form without marking any of the FOR, AGAINST, PROXY DISCRETION or ABSTAIN boxes for a particular resolution, you will be deemed to have abstained from voting on that resolution and your votes will not be counted when calculating a majority for that resolution.</li> <li>If you do not cast a postal vote and wish to appoint a proxy to vote on a resolution on your behalf, mark the PROXY DISCRETION box which relates to that resolution. This means you are directing your proxy to decide how to vote on that resolution on your behalf.</li> <li>In addition to casting a postal vote, you may also appoint a proxy to attend the meeting on your behalf by selecting YES above.</li> </ol> STEP 2 Appointing a Proxy If you mark any of the PROXY DISCRETION boxes or the YES box above you must appoint a proxy. This may be the Chair if you so wish.									
I/We being a sh	areholder/s of Sanford Limited								
hereby appoint				of					
or failing him/her of as my/our proxy/corporate representative to attend and, if applicable, exercise my vote at the Annual Meeting of Sanford Limited to be held in GridAKL, The Workshop Room, Level 1, 12 Madden Street, Wynyard Quarter, Auckland 1010 on Friday, 13 December 2019 commencing at 2.00pm and at any adjournment of that meeting and to vote on any resolutions to amend any of the resolutions, on any resolution so amended and on any resolution proposed at the meeting (or any adjournment thereof) so as to give effect to my/our intention as set out above.									
SIGN	Signature of Securityhold	ier(s) This section	n must be completed.						
Securityholder	L	Securityholder 2		s	Securityholo	der 3			
Contact Name_			Contact Daytime Telephone	e			Date_		

ATTENDANCE SLIP

