PROXY FORM

(FULL NAME IN UPPER CASE)		, ' .	(LAST 4 ALPHANUMERIC CHARACTERS OF NRIC/ PASSPORT NUMBER INCLUDING ALPHABET)	
of	ADDRESS)		(CONTACT NUMBER)	
being an Ordinary/Life member my proxy to vote for me at the March 2024 and any adjournme	of MCAS do hereby appoi 44 th Annual General Me		ving Ordinary/Life member as	
NAME				
ADDRESS				
LAST 4 CHARACTERS OF NRIC/PASSPORT NUMBER INCLUDING ALPHABET (Eg. NRIC No. S****123F)				
CONTACT NO.				
Signature of member:				
Dated this	day of		2024	

NOTES:

- 1) The proxy shall not be entitled to vote at a meeting unless the instrument of proxy has been deposited with the MCAS Corporate Affairs Division by **5.00 pm on Wednesday, 13 March 2024**.
- 2) Incomplete Proxy Form shall be rejected.
- 3) Member and proxy must hold valid membership.
- 4) No member shall hold more than one proxy at the AGM.