PROXY FORM

or attorney duly authorized in writing.

CARIBBEAN ASSURANCE BROKERS LIMITED

I/We		of		
	er/members of Caribbean Assurance E			
		herand failing him/her		
of	, as my/our	r Proxy to vote for me/us and on my/our behalf at the Annual		
General Meeting	g of the Company to be held at The Jar	maica Pegasus Hot	el, 81 Knutsford Bo	ulevard, Kingston 5 or
Friday August 18	8, 2023 at 10.00am and at any adjourn	nment thereof.		
Please indicate	by inserting a cross in the appropriate	e square how you w	rish your votes to b	e cast on the
resolutions refer	rred to. Unless otherwise instructed, the	e Proxy will vote or	abstain from voting	g at his/her discretion.
Resolution 1:				
"THAT the Audi	ted Accounts together with the Report	s of the Directors a	nd the Auditors cir	culated and
The Notice conv	vening the Meeting be and are hereby	adopted.	⊠ For	Against
Resolution 2:				
"THAT Directors	Barrington Whyte , Norman Minott and	d Jennifer Rajpat, wl	ho retire by rotation	n, and being eligible for
re-election, be a	and are hereby re-elected Directors of t	the Company".	⊠ For	Against
Resolution 3:				
"THAT BDO, hav	ving agreed to continue to serve as au	ditors, be and is he	reby appointed Au	iditors of
Caribbean Assu	ırance Brokers Limited, to hold office uı	ntil the next Annual	General Meeting,	at a remuneration to
be fixed by the [Directors of the Company."		⊠ For	Against
Signed		Dated: the	date of	2023
NOTES:				
1. This form of Proxy	must be received by the Secretary of the Con	mpany not less than 48	hours before the time	appointed for the Meeting.

2. This form of Proxy should bear the stamp duty of \$100. Adhesive stamps are to be cancelled by the person signing the proxy.

3. If the appointer is a Corporation, this Form of Proxy must be executed under its Common Seal or under the hand of an officer