



FORM OF PROXY

I (Name of Member)
of Registration Number..... Being a member in good
standing of the Institute of Certified Public Accountants of Kenya hereby appoint:

Name of Proxy.....ID/Passport
Number..... Member Number.....

Or failing him/her the Chairman of the meeting to be my proxy, to vote for me/ on
my behalf at the Annual General Meeting of the Institute to be held on Friday, 7th
June, 2019 at the, Nairobi from 10.30 a.m or any
adjournment thereof.

As witnessed by my hand this
day.....of.....2019

Name:

Signature:

Note: To be valid, the completed Form of Proxy must be deposited with the
secretariat so as to be received not later than 10.30 am on Friday 31st May, 2019.