+27 21 402 1600 info@sannegroup.co.za Sannegroup.com



**Annexure B** 

## BALLOT FORM – AMALGAMATION TO BE RETURNED

| Name (piease print full names)   |  |        |        |   |   |              |             |
|--|--|--------|--------|---|---|--------------|-------------|
| Date of birth / ID / registration number  Linked services product /life company name (if applicable)  Account number |  |        |        |   |   |              |             |
|  |  |        |        |   | l amalgamation of the portfolios listed below ontrol Act No 45 of 2002, as set out in t |              |             |
|  |  |        |        | Management Company (RF) (Pty) Ltd (if y | ou are an investor in the Source portfolio, tio   | ck the appro | opriate box |
| next to that line with an "X" please, a no res   | ponse will be regarded as acceptance): |        |        |   |   |              |             |
| Source Portfolio established under   | Amalgamated Portfolio established      | Accept | Reject |   |   |              |             |
| the SNN Retail Hedge Fund Scheme   | under the RCIS Retail Hedge Fund       |        |        |   |   |              |             |
|  | Scheme                                 |        |        |   |   |              |             |
| AIP SNN Multi-Strategy Retail Hedge  | AIP RCIS Multi-Strategy Retail Hedge   |        |        |   |   |              |             |
| Fund   | Fund                                   |        |        |   |   |              |             |
| Signed at  |  |        |        |   |   |              |             |
| nvestor Signature  |  |        |        |   |   |              |             |
| f you are signing in a representative capacity, please insert your own name and the name of the person / trust       |  |        |        |   |   |              |             |
| deceased estate / company / close corpor   | ation on whose behalf you are signing. |        |        |   |   |              |             |
|  |  |        |        |   |   |              |             |
| Signature & Name of Authorised Representative  |  |        |        |   |   |              |             |

Note: Please complete, sign and return the ballot form to our auditors by email to **za\_sanne\_ballot@pwc.com** to reach them no later than midnight on the **21 July 2023.**