

APPOINTMENT OF PROXY FORM - GENERAL MEETING 2026

To: The Secretary
Motor Neurone Disease Association of Queensland Inc.
PO Box 470, INALA QLD 4077

I _____ [name] of [address] _____

being a financial member of the Association as at _____ February 2026 hereby appoint: -

_____ [name] of [address] _____

or (circle below if you prefer to nominate the President of MND Queensland as your proxy)

The President of the Management Committee of MND Queensland

as my proxy to attend and exercise my vote on my behalf at the General Meeting of the Association to be held on **24 February 2026** and at any adjournment thereof.

SIGNED this _____ day of _____, 2026

Signature of Member

This form is to be used in favour of / against the following motions as indicated:

Vote

1. Transfer of Registration

*in favour / *against

An application be made under Part 14 Division 1 of the Associations Incorporation Act 1981 (Qld), for authority to transfer incorporation of Motor Neurone Disease Association of Queensland Incorporated (Registration number: IA06034) to a company limited by guarantee under Part 5B.1 of the Corporations Act 2001 (Cth); and

The President, Vice President and Treasurer (being three members of the Management Committee) are authorised to make and sign the application; and

The name under which Motor Neurone Disease Association of Queensland Incorporated is to be registered under the Corporations Act 2001 (Cth) will be Motor Neurone Disease Queensland Limited; and

The constitution tabled at the Annual General Meeting (a copy of which has been made available to Members), be adopted as the constitution of the company Motor Neurone Disease Queensland Limited.

2. Consequential Matters

*in favour / *against

To authorise the Management Committee to do all things necessary to lodge the application for authority to transfer the association's incorporation and register the new company, and to insert details regarding the ACN and date of adoption in the constitution of Motor Neurone Disease Association of Queensland Limited.

*Strike out whichever is not desired. (Unless otherwise instructed, the proxy may vote as he/she thinks fit.)

Note:

The form must be signed personally by the member or his/her attorney and returned to the Secretary before 4:30pm 22 February 2026

In person: 1/89 Factory Rd, Oxley Qld 4075 | Post: PO Box 470, Inala Qld 4077 | Email: info@mndqld.com.au