**ADMINISTRATIVE COMMITTEE**

**INVESTOR COMPENSATION FUND OF CLIENTS OF IFs**

**Diagorou 27, 1097 Nicosia**

**Tel.: 22506600, Fax: 22 506700**

**E-mail:** **tae@cysec.gov.cy****,** [**http://www.cysec.gov.cy**](http://www.cysec.gov.cy)

**APPLICATION FOR APPOINTMENT OF A PROXY**

The member of the Investor Compensation Fund for IFs’ Clients ……………………………………………………………………………………………………, with license number……….. ….……...………………………………………………………….,

hereby appoints, pursuant to the provisions of paragraph 9 of Directive DI144-2007-09 on the General Meeting of the members of the IFC for Clients of IFs, the member of the Investor Compensation Fund for IFs’ Clients…………………………………………………………., with license number ………...……………………………………………………………………,

as its proxy at the extraordinary General Meeting of the Fund, which will be held on 21 April 2016 or at any postponement of it.

The represented member of the Fund (seal / signature)

………………………………………….........................................................................................

Application Date

……………………………………………...

Date of receipt of this Form from the Administrative Committee ……………......……………...