

PROXY FORM

NATURAL HEALTH PRODUCTS NEW ZEALAND INCORPORATED ANNUAL GENERAL MEETING 2026

**Thursday 7 May 2026
12.30pm via TEAMS**

**This form provides for proxy to vote at the
Annual General Meeting of
Natural Health Products New Zealand Incorporated**

Full Financial Member	
Company Name:	
Company Mailing Address:	
Name:	
Phone/Mobile:	
Email:	

Proxy Details	
Name:	
Proxy's Company Name:	
I hereby appoint the abovenamed company representative as my proxy for the abovenamed company for voting at the Annual General Meeting of Natural Health Products New Zealand Incorporated on Thursday 7 May 2026.	
Signature:	
Name:	
Date:	

- * **The submitter of this proxy form and the nominated proxy must both be current full financial members of Natural Health Products New Zealand Incorporated.**
- * **Only one person from each full member company may vote at the AGM.**

Completed Proxy Forms must be received by Natural Health Products NZ via scanned email to kerry@naturalhealthproducts.nz by 10:30am, Thursday 7 May 2026.

Proxies received after this time and date will be deemed invalid.