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• Email: contact@seamec.in

PROXY FORM

Name	of the Member(s)	:	
Registe	ered Address	:	
E-mail	ld	:	
Folio N	o / DP ID - Client Id	:	
I/We, be	eing the holder(s) of	shares of the above named Company, here	eby appoint
Add	dress:		
E- r		Signature:	
2 Nai			
		Signature:	
E- r	mail ld:	Signature:	
Compa	our proxy to attend on Frions, to be held on Frions	and vote (on a poll) for me/us and on my/our behalf at the 32 nd Annuc day, 9 th August, 2019 at 4.30 p.m at Vits Hotel, Andheri Kurla Road, Internat	tional Airport Zone, Andher
Compa	our proxy to attend on Frion Iny, to be held on Frion Mumbai 400 059 and		tional Airport Zone, Andher
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Note:

- 1. This form of proxy in order to be effective should be duly completed and deposited at the Registered Office of the Company not less than 48 hours before the commencement of the meeting.
- 2. For the Resolutions, Explanatory Statement and Notes, please refer to Notice of the 32nd Annual General Meeting.
- 3. Please complete all details including details of member(s) in above box before submission.