

# FORM OF PROXY VOTING SHAREHOLDERS

I/ We, Mr./ Mrs./ Miss .....of  
.....(address)

being a member of Ceylon Hospitals PLC, hereby appoint

- |                                  |                |
|----------------------------------|----------------|
| Mr. A. E. Tudawe                 | or failing him |
| Mr. A. V. R. De S. Jayatilleke   | or failing him |
| Dr. A. D. P. A. Wijegoonewardene | or failing him |
| Mr. U. D. Tudawe                 | or failing him |
| Mr. Y. N. R. Piyasena            | or failing him |
| Mr. A. D. B. Talwatte            | or failing him |
| Mr. A. S. Tudawe                 | or failing him |
| Mr. S. Renganathan               | or failing him |
| Mr. H.M.A. Jayasinghe            | or failing him |

Mr./ Mrs./ Miss ..... of  
..... (address) as  
my/ our proxy to attend (and vote for me/ us) on my/ our behalf at the 80<sup>th</sup> Annual General Meeting of the Company to be held on .....2026 and at any adjournment thereof.

**NOTE**

If the Proxy Form is signed by an Attorney, the relative Power of Attorney should also accompany the completed Form of Proxy, if it has not already been registered with the Company.

**AGENDA ITEMS / RESOLUTIONS**

	FOR	AGAINST
To lay before the meeting, Financial Statements for the year ended 31 <sup>st</sup> March 2026	-	-
To re-elect Mr. S. Renganathan (R1)	<input type="checkbox"/>	<input type="checkbox"/>
To re-appoint Mr. A.E. Tudawe (R2)	<input type="checkbox"/>	<input type="checkbox"/>
To re-appoint Dr. A. D. P. A. Wijegoonewardene ((R3)	<input type="checkbox"/>	<input type="checkbox"/>
To re-appoint Mr. Y. N. R. Piyasena (R4)	<input type="checkbox"/>	<input type="checkbox"/>
To re-appoint Mr.ADB.Talwatte (R5)	<input type="checkbox"/>	<input type="checkbox"/>
To re-appoint Auditors (R6)	<input type="checkbox"/>	<input type="checkbox"/>
To authorise the Board of Directors to determine donations (R7)	<input type="checkbox"/>	<input type="checkbox"/>

Mark your preference with "X"  
Signed on this ..... day of ..... 2026

.....Signature

# FORM OF PROXY

## NON-VOTING SHAREHOLDERS

I/ We, Mr./ Mrs./ Miss ..... of  
..... (address)

being a member of Ceylon Hospitals PLC, hereby appoint

Mr. A. E. Tudawe	or failing him
Mr. A. V. R. De S. Jayatilleke	or failing him
Dr. A. D. P. A. Wijegoonewardene	or failing him
Mr. U. D. Tudawe	or failing him
Mr. Y. N. R. Piyasena	or failing him
Mr. A. D. B. Talwatte	or failing him
Mr. A. S. Tudawe	or failing him
Mr. S. Renganathan	or failing him
Mr. H.M.A. Jayesinghe	or failing him

Mr./ Mrs./ Miss ..... of  
..... (address) as  
my/ our proxy to attend on my/ our behalf at the 80<sup>th</sup> Annual General Meeting of the Company to be held on  
.....2026 and at any adjournment thereof.

### NOTE

If the Proxy Form is signed by an Attorney, the relative Power of Attorney should also accompany the completed Form of Proxy, if it has not already been registered with the Company.

Signed on this ..... day of ..... 2026

.....  
Signature

#### INSTRUCTIONS TO COMPLETE THE FORM OF PROXY

1. Kindly perfect the Form of Proxy after filling legibly your full name and address, by signing in the space provided and dating same.
2. If the Proxy Form is signed by an Attorney, the relative Power of Attorney should also accompany the completed form of proxy, if it has not already been registered with the Company.
3. The completed Form of Proxy should be deposited at the Registered Office of the Company at No. 3, Alfred Place, Colombo 03. (not less than 48 hours before the time appointed for the holding of the meeting).
4. A member is entitled to appoint a proxy to attend instead of himself and a proxy need not be a member of the Company.