FORM - APPOINTMENT OF PROXY

PRIVIUM PTY LTD (ADMINISTRATORS APPOINTED) ACN 085 773 931 ("THE COMPANY")

I/We(name of signatory,				
of _				(creditor name)
a cr	reditor of the company, appoint			(name of proxy)
of _			(a	ddress of proxy)
or i	n his/her absence		(details of	alternate proxy)
202	my/our □ general proxy or □ special proxy to vote at the meeting at 10:00 AM(AEST) or at any adjournment of that meeting. Special proxy, specify how you wish your proxy to vote for each respectively.		rs to be held on	22 December
	Voting instructions - for special proxy only	For	Against	Abstain
Re	esolution			
1.	Future of the Company (only vote for one of the below options)			
	The Administration should end.			
	The Company be wound up.			
2.	The second meeting of creditors be adjourned for a period not exceeding forty-five (45) business days.			
3.	Voluntary Administrators' Remuneration			
	The remuneration of the Voluntary Administrators of Privium Pty Ltd (Administrators Appointed) ACN 085 773 931, their partners and staff, for the period 17 November 2021 to 5 December 2021 (inclusive), calculated at the hours spent at the rates detailed in the FTI Consulting Standard Rates (Corporate Finance & Restructuring Effective 1 July 2021, and Forensics, Litigation and Consulting Effective 1 June 2021), is approved for payment in the amount of \$324,267.50 (exclusive of GST), to be drawn from available funds immediately or as funds become available			
	The remuneration of the Voluntary Administrators of Privium Pty Ltd (Administrators Appointed) ACN 085 773 931, their partners and staff, for the period 6 December 2021 to 21 December 2021 (inclusive), calculated at the hours spent at the rates detailed in the FTI Consulting Standard Rates (Corporate Finance & Restructuring			

Effective 1 July 2021, and Forensics, Litigation and Consulting Effective 1 June 2021), is approved for payment in the amount of \$368,000.00, (exclusive of GST), to be drawn from available funds immediately or as funds become available

*I/*We authorise *my/*our proxy to vote as a general (delete if not required)	proxy on resolutions other than those specified above
Dated:	
Name and signature of authorised person	Name and signature of authorised person
CERTIFICATE OF WITNESS – only complete if the person	n given the prove is blind or insanable of writing
certify that the above instrument appointing a proxy w request of the person appointing the proxy and read to instrument.	as completed by me in the presence of and at the
Dated:	Signature of witness:
Description:	Place of residence: