

NORTH CAROLINA INSURANCE GUARANTY ASSOCIATION

(PROXY FORM)

KNOW ALL MEN BY THESE PRESENTS THAT I ,

(Insert Name)

, of the

(Insert Title) (Insert Name of Company)

do hereby constitute and appoint

(Insert Name of Proxy)

as my attorney and agent for the said Company, in my name, place and stead to vote as proxy at the meeting of member insurers of the NORTH CAROLINA INSURANCE GUARANTY ASSOCIATION to be held on the **Fifteenth (15th) day of October, 1996** and/or such other date or dates to which such meeting may be adjourned, hereby giving to such attorney and agent power and authority to act conclusively for said Company on all questions which may duly come before such meeting as fully as I could act if I were personally present.

IN WITNESS WHEREOF I have hereunto subscribed my name and title and the name of said Company, this day of , 1996.

(Signature) (Title) (Company)

Return to:

North Carolina Insurance Guaranty Association

P. O. Box 176010

Raleigh, North Carolina 27619-6010