

First Applicant Name – Name & Surname – Line 2 AddressLine1 AddressLine2 AddressLine3 (space) Postcode AddressLine4



8 May 2025

The Grandmaster Suite, Conference Centre, Hilton Malta, St Julians

ADMISSION TO THE MEETING

Please present a lawful means of identification, together with this document.

The Meeting will commence at 1800 hrs. Admission to the Meeting will start at 1700 hrs. Parking will be available on a first come first served basis.

MSE Account Number: ID Card No / Company Registration No.: Registered Holdings: barcode 70x0 mm

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PROXY FORM

Full Registered Name – Name & Surname Line 2 MSE Account Number: Registered Holdings: APS Bank plc ANNUAL GENERAL MEETING 8 May 2025

This Proxy Form needs not be completed/submitted by Members who intend to be present in person at the Annual General Meeting (the "Meeting"). To be valid this Proxy Form must reach Company Secretariat not less than 24 hours before the appointed date and time of the Meeting (i.e. 7 May 2025 at 1800 hrs).

As "Member"/ "Members" of the APS Bank plc, I/we hereby appoint: (mark where applicable)

The Chairman of the Meeting

OR

(insert details of the Proxy)

Name

Address

as my/our proxy to attend and vote on my/our behalf at the Meeting and at any

VOTING PREFERENCES FOR AGAINST ABSTAIN ORDINARY BUSINESS - ORDINARY RESOLUTIONS Item 3 Approval of the audited financial statements for the financial year ended 31 December 2024 Declaration of Dividend ltem 4 Appointment & remuneration Item 5 of Auditors ltem 7 Emoluments of Directors SPECIAL BUSINESS – ORDINARY RESOLUTIONS Remuneration Report (advisory Item 8 vote) Item 9 Rights issue and Directors' Authority to issue Shares for the purpose of undertaking a **Rights** Issue SPECIAL BUSINESS – EXTRAORDINARY RESOLUTIONS Item 10 Directors' authority to issue Shares limitedly for the purpose of implementing any decision to pay a scrip dividend, and to affect a capitalisation of profits Item 11 Directors' authority to issue debt securities

My/Our proxy is authorised to vote:

as he/she wishes

adjournment thereof.

as indicated on this Proxy Form

I.D. Card No

SIGNATURE OF MEMBER/S

DATE

barcode 70x0 mm