



SABOR LIMITED

NOMINATION FORM TO BECOME A MEMBER

Under Article four of the Articles of Association I nominate to become a member of SABOR Limited

Name.....nominate to become an individual
member of SABOR Limited

Are you directly a SA Pig Industry Fund Levy Payer Yes/No

Occupation:.....

Address:.....

OR

Corporate Name:.....nominate my business as a
member of SABOR Limited.

Is this entity directly a SA Pig Industry Fund Levy Payer Yes/No

Place of Business.....

I undertake to work for the interests of SABOR Limited and to observe the rules of the company as in force

Signed:..... Date...../...../.....
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