APPOINTMENT OF CORPORATE REPRESENTATIVE FORM



ANZ SHARE REGISTRAR

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HOW TO COMPLETE THIS FORM

Α

APPOINTMENT OF CORPORATE REPRESENTATIVE

This Form should be used by a corporate shareholder to appoint a representative to attend any or all future meetings of shareholders of ANZ Group Holdings Limited (ANZ) ABN 16 659 510 791 (including Annual General Meetings) or any adjournments of such meetings. The Form (including any authority under which it is signed or a certified copy of that authority) may be sent to ANZ's Share Registrar in advance of any meeting to which it applies or submitted at the time of registration before such meeting.

Do not use this Form to appoint the Chairman of the Meeting as your proxy.

Where a body corporate has been appointed as a proxy, this Form cannot be used by that body corporate to appoint a representative – contact ANZ's Share Registrar to obtain the appropriate form for use in that scenario.

B

SIGNATURE(S)

This Form should be signed as follows in the spaces provided:

- by either 2 Directors or a Director and a Company Secretary;
- alternatively, where the company has a Sole Director and, pursuant to the Corporations Act, there is no Company Secretary, or where the Sole Director is also the Sole Company Secretary, that Director may sign alone.

Delete titles as applicable.

С

REVOCATIONS

ANZ will treat an appointment as revoked upon the appointer notifying ANZ in writing. Written revocations should be sent to ANZ's Share Registrar. ANZ will also treat an appointment as revoked upon a subsequent Appointment of Corporate Representative Form being submitted, unless otherwise specified.

APPOINTMENT OF CORPORATE REPRESENTATIVE FORM

APPOINTMENT OF CORPORATE REPRESENTATIVE

APPOINTMENT OF CORPORATE REPRESEN The above named registered holder hereby certifies that		ificate purs	uant to	o section	250D of the Corporations Act 2001)	
Insert name of appointed representative		is appointed as its corporate representative to act at				
	Day	Month	,	Year		
the meeting of ANZ shareholders to be held on OR	/		/		and at any adjournments of that meeting	
all meetings of ANZ shareholders and at any adjournments of any such meetings						
Please state if there are any restrictions on the represent	tative's power:	Yes	N	lo		
If yes, please describe these restrictions						
Contact name				Telepho	ne Number – Business Hours / After Hours	

Α

SIGN HERE - THIS SECTION MUST BE SIGNED FOR YOUR INSTRUCTIONS TO BE EXECUTED

I/We authorise you to act in accordance with the instructions set out above. I/We acknowledge that these instructions supersede and have priority over all previous instructions.

Director/Sole Director and Sole Company Secretary Director/Company Secretary

Sole Director (No Company Secretary)

/ / Month

Day

Year