

**MERGER OF  
FARMERS TOWN MUTUAL INSURANCE COMPANY  
INTO  
ARLINGTON MUTUAL INSURANCE COMPANY**

**PROPOSED POLICYHOLDER RESOLUTIONS BALLOTS**

**September 29, 2022**

**MERGER OF  
FARMERS TOWN MUTUAL INSURANCE COMPANY  
INTO  
ARLINGTON MUTUAL INSURANCE COMPANY**

**POLICYHOLDER RESOLUTION BALLOT**

**RESOLVED**, after review of the Summary of the Plan of Merger of Farmers Town Mutual Insurance Company into Arlington Mutual Insurance Company and attached Exhibits, and ability to inquire of the Board regarding the same, the members of **Arlington Mutual Insurance Company** hereby adopt and approve the Agreement and Plan of Merger, including the Amended and Restated Articles of Incorporation included as Exhibit A and the Amended and Restated Bylaws included as Exhibit B, and authorize its Board of Directors to take any remaining actions necessary to effectuate such merger.

**Should this policyholder resolution be approved?**

- YES**  
 **NO**

**Questions/Comments:**

Arlington Mutual Policy #: \_\_\_\_\_

Member: \_\_\_\_\_  
(Print Name)

Member's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE: Ballot must be received by November 10, 2022, for your vote to be counted. Ballots can be returned via email to [Lisa.Eid@claconnect.com](mailto:Lisa.Eid@claconnect.com) or via mail in the envelope enclosed.**

**MERGER OF  
FARMERS TOWN MUTUAL INSURANCE COMPANY  
INTO  
ARLINGTON MUTUAL INSURANCE COMPANY**

**POLICYHOLDER RESOLUTION BALLOT**

**RESOLVED**, after review of the Summary of the Plan of Merger of Farmers Town Mutual Insurance Company into Arlington Mutual Insurance Company and attached Exhibits, and ability to inquire of the Board regarding the same, the members of **Farmers Town Mutual Insurance Company** hereby adopt and approve the Agreement and Plan of Merger, including the Amended and Restated Articles of Incorporation included as Exhibit A and the Amended and Restated Bylaws included as Exhibit B, and authorize its Board of Directors to take any remaining actions necessary to effectuate such merger.

**Should this policyholder resolution be approved?**

- YES**  
 **NO**

**Questions/Comments:**

Farmers Town Mutual Policy #: \_\_\_\_\_

Member: \_\_\_\_\_  
(Print Name)

Member's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**NOTE: Ballot must be received by November 10, 2022, for your vote to be counted. Ballots can be returned via email to [Lisa.Eid@clacconnect.com](mailto:Lisa.Eid@clacconnect.com) or via mail in the envelope enclosed.**