

**MERGER OF
BRISTOL TOWN INSURANCE COMPANY
INTO
FORWARD MUTUAL INSURANCE COMPANY**

**PROPOSED POLICYHOLDER RESOLUTION BALLOTS
(MAIL AND IN PERSON)**

**FILED WITH THE WISCONSIN OFFICE OF
THE COMMISSIONER OF INSURANCE**

August 11, 2023

BRISTOL TOWN INSURANCE COMPANY
SPECIAL MEETING OF MEMBERS - SEPTEMBER 26, 2023,

MERGER OF
BRISTOL TOWN INSURANCE COMPANY
WITH AND INTO
FORWARD MUTUAL INSURANCE COMPANY

POLICYHOLDER RESOLUTION MAIL BALLOT

WHEREAS, Bristol Town Insurance Company, a Wisconsin town mutual insurance corporation, desires to effectuate a merger with and into Forward Mutual Insurance Company, a Wisconsin mutual insurance corporation, in accordance with Section 612.22 of the Wisconsin Statutes and pursuant to the Agreement and Plan of Merger, by and between Bristol Town Insurance Company and Forward Mutual Insurance Company, in the form presented to the members of Bristol Town Insurance Company in connection with this Special Meeting of the members, whereby the separate existence of Bristol Town Insurance Company shall cease and Forward Mutual Insurance Company shall continue as the surviving company.

RESOLVED, that after review of the Summary of the Plan of Merger and the Agreement and Plan of Merger of Bristol Town into Forward Mutual, and the ability to inquire of the Board of Directors regarding the same, the members of Bristol Town Insurance Company hereby adopt and approve the Agreement and Plan of Merger and authorize its Board of Directors to take any remaining actions necessary to effectuate such merger.

Should this policyholder resolution be approved?

(Select only one)

YES

NO

I plan to attend the Special Meeting and will vote in person.

Questions/Comments:

Bristol Town Insurance Company Policy #: _____

Member: _____
(Print Name)

Member's Signature: _____

Date: _____

NOTE: This ballot must be received by September 26, 2023 at 6:30, for your vote to be counted. Ballots can be returned via email to bristoltown1875@gmail.com or via mail in the envelope enclosed. You may also attend the meeting and vote in person.

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Should this policyholder resolution be approved?

(Select only one)

YES

NO

Bristol Town Insurance Company Policy #: _____

Member: _____
(Print Name)

Member's Signature: _____