## **PROXY FORM**

		ow-mentioned policy at Jewelers Mutual Insurance Company (JMIC), you are a JMIC Member agenda items that are proposed at a meeting of Members:	er and have
Insure	d's Name and P	olicy Number:	_
Voting	is simple and or	nly takes a few moments of your time.	
1)	REVIEW	Read the enclosed proxy material carefully.	
2)	EXECUTE	Authorize your Vote by checking one box, sign and date.	
3)	RETURN	Mail the proxy form in the postage-paid envelope provided OR follow the instructions for e-submission of the proxy form	
person	al control numb	e electronically even if you received a paper proxy form. Just go to [website] and enter you er that appears [below/above]. You must provide a control number in order to enter the well site, please follow the instructions for electronically submitting your vote. If you cast your vote.	bsite. After yo
The conto	proxy form mustemplated theresteby. If the box land the transaction pany Plan and the is indicated for In their discretable law and standard the transaction in the landard pany Plan and standard pany plan a	JEWELERS MUTUAL INSURANCE COMPANY PROXY FOR A SPECIAL MEETING OF MEMBERS TO BE HELD ON [DATE] It be marked with a vote either "For" approval of the Mutual Holding Company Plan and the toy or "Against" approval of the Mutual Holding Company Plan and the transactions abeled "Against" is marked, the proxy will be voted Against approval of the Mutual Hold ctions contemplated thereby. If a proxy form contains a vote both "For" and "Against" the Matthe transactions contemplated thereby, it will not be cast or counted. If the proxy form is expected to the Mutual Holding Company Plan and the transactions contemplated thereby, the proxy petion, the Proxies are authorized to vote on any other business as may properly, in according to the Mutual Holding.	contemplated ing Company lutual Holding ecuted but no will be voted cordance with nanner as the
trans		re the Mutual Holding Company Plan, dated as of [DATE], and the plated thereby, including the amendment and restatement of the tion of JMIC.	AGAINST
compa repres	any, or partnership, sentative, executor,	Y IMPORTANT. Please sign exactly as name or names appear heron. If the policyholder is a corporation this proxy should be signed by an authorized officer, member, or partner as the case may be. When signing as a administrator, trustee, or guardian, please give full title as such. [Need to conform language as necessary for ege, drop-down box choices as appropriate, etc.]]	ttorney, personal

Date:

Title

Signature of Policyholder

## JEWELERS MUTUAL INSURANCE COMPANY PROXY FOR A SPECIAL MEETING OF MEMBERS TO BE HELD ON [DATE]

Important Notice Regarding the Availability of Proxy Materials for the Special Meeting to be Held on [DATE]: The Notice of Special Meeting of Members, the Policyholder Information Statement, the Mutual Holding Company Plan including all exhibits thereto and additional information are available online at [www.jewelersmutualplan.com].

The Policyholder/s named on the proxy form, individually or collectively a Member of JEWELERS MUTUAL INSURANCE COMPANY (JMIC), hereby constitutes and appoints Scott Murphy, President and Chief Executive Officer, and Mark Willson, Vice President and General Counsel, and each of them, as the Member's Proxy, with full power of substitution and revocation, to vote for and in the name of the above Policyholder/s at the Special Meeting of Members to be held on [DATE], at [TIME], Central Standard Time, at JMIC's offices at 24 Jewelers Park Drive, Neenah, Wisconsin, or any adjournments, postponements, reschedulings or continuations thereof, upon the matters set forth on the reverse side of this proxy form and described in the Policyholder Information Statement dated [DATE] and upon such other business as may properly, in accordance with applicable law and JMIC's Articles of Incorporation and Bylaws, come before the Special Meeting. Each Member is entitled to one vote, even if multiple Policyholders are named on the proxy form. Where more than one Policyholder is named in a policy, all those named shall collectively constitute one Member for the purpose of voting at meetings of members.

To execute a proxy form you received in the mail, please complete, sign, date and promptly return it to the Proxy Agent in the postage-paid envelope provided. If you received the proxy form electronically because of your choice to accept e-delivery from JMIC, please follow the instructions for e-submission of your proxy vote. All proxy forms must be received by the Proxy Agent by 12:00 a.m., Central Standard Time, [DATE] in order to be valid.

If you should have a question about the proxy material, this proxy form, or how to complete or submit your written or electronic proxy form, please call [phone number] Monday through Friday between the hours of 8:00 a.m. and [TIME] p.m. Central Standard Time.

YOUR CONSIDERATION AND PARTICIPATION IN THIS VOTING PROCESS IS GREATLY APPRECIATED.

Comparison Details			
Title	compareDocs Comparison Results		
Date & Time	4/11/2019 12:14:07 PM		
Comparison Time	0.93 seconds		
compareDocs version	v4.3.300.62		

Sources				
Original Document	[#00099324.DOCX] [v2] Proxy Form.DOCX			
Modified Document	[#00099324.DOCX] [v3] Proxy Form.DOCX			

Comparison Statistics		
Insertions	1	
Deletions	0	
Changes	0	
Moves	0	
Font Changes	0	
Paragraph Style Changes	0	
Character Style Changes	0	
TOTAL CHANGES	1	

Word Rendering Set Markup Options				
Name	Standard			
Insertions				
Deletions				
Moves / Moves				
Font Changes				
Paragraph Style Changes				
Character Style Changes				
Inserted cells				
Deleted cells				
Merged cells				
Changed lines	Mark left border.			
Comments color	By Author.			
Balloons	False			

compareDocs Settings Used	Category	Option Selected
Open Comparison Report after Saving	General	Always
Report Type	Word	Formatting
Character Level	Word	False
Include Headers / Footers	Word	True
Include Footnotes / Endnotes	Word	True
Include List Numbers	Word	True
Include Tables	Word	True
Include Field Codes	Word	True
Include Moves	Word	False
Show Track Changes Toolbar	Word	True
Show Reviewing Pane	Word	True
Update Automatic Links at Open	Word	[Yes / No]
Summary Report	Word	End
Include Change Detail Report	Word	Separate
Document View	Word	Print

Remove Personal Information	Word	False
Flatten Field Codes	Word	True