



## NEW MEXICO MUTUAL CASUALTY COMPANY POLICYHOLDER PROXY CARD

*Members are requested to complete and return this Proxy Card in the enclosed postage-paid envelope by May 9, 2025.*

### THIS PROXY IS SOLICITED ON BEHALF OF THE BOARD OF DIRECTORS

I am a current policyholder of New Mexico Mutual Casualty Company and:

☐ **YES**, I will attend the Annual Meeting on Friday, May 16, 2025, as indicated below:

☐ **Physically** at the New Mexico Mutual Home Office.

OR

☐ **Virtually** via Cisco Webex.

*Please note: The meeting link will be sent to the email address provided by Policyholder below.*

☐ **NO**, I will not attend the Annual Meeting on Friday, May 16, 2025, and I authorize Kellie Mixon, unless otherwise specified below, to attend on my behalf and to vote on business matters properly brought before the Policyholders at the Annual Meeting.

Other Proxy (if any): \_\_\_\_\_

**This Proxy is revocable.**

\_\_\_\_\_  
**Policyholder or Company Name**

\_\_\_\_\_  
**Email Address** *(please print legibly)*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_, 2025  
**Date**

\_\_\_\_\_  
**Name & Title**

\_\_\_\_\_  
**Phone Number**

**Note:** If this Proxy Card is signed, completed, and returned, then the specified Proxy may vote, in his or her discretion, on any business matter properly brought before the Policyholders at the Annual Meeting. If this Proxy Card is signed, completed, and returned with no specifications, then your vote defers to the Board of Directors of New Mexico Mutual Casualty Company.