

Proxy form

(Shareholder details: name and surname or company name)

(Address)

(Town and postal code)

Pozavarovalnica Sava, d.d. / Sava Reinsurance Company
Dunajska 56
1000 Ljubljana

**PROXY FORM FOR ATTANCANCE AT
24TH GENERAL MEETING OF SHAREHOLDERS OF SAVA REINSURANCE COMPANY**

I, the undersigned, _____
Name and surname of shareholder or company name of shareholder and name and surname of legal representative

hereby appoint

Name and surname, personal ID no. (EMŠO) and residence of proxy holder

as my proxy to attend and to vote for me and on my behalf at the 24th General Meeting of Sava Reinsurance Company to be held on Wednesday, 29 June 2011 at 13:00 hrs at the Horus Hall of the Austria Trend Hotel Ljubljana, Dunajska cesta 154, 1000 Ljubljana, for _____ shares of the issuer Sava Reinsurance Company with the symbol POSR, the holder of which I am.

The proxy is to provide personal identification upon request.

(Place and date)

(Signature of shareholder or legal representative with official stamp of entity, or seal if used)