

PROXY FORM

The undersigned, a member of the Dairylea Safety Group of The State Insurance Fund constitutes and appoints the Secretary of said Group as true and lawful attorney in the name of and on behalf of the undersigned to vote at the Annual Meetings of Dairylea Safety Group for the purpose of transacting any and all business to come before such meeting and hereby ratify and confirm all that said attorney may do hereunder with the same force and effect as if the undersigned were present in person. This proxy shall be valid until it is terminated.

NAME OF COMPANY

OFFICER'S SIGNATURE & OFFICIAL TITLE

DATE