Form No. MGT-11 **PROXY FORM**

[Pursuant to section 105(6) of the Companies Act, 2013 and rule 19(3) of the Companies (Management and Administration) Rules, 2014]

Name of the Company		QUESS CORP LIMITED		
CIN		1.74140KA2007DLC042000		
Registered office		3/3/2, Bellandur Gate, Sarjapur Main Road, Bangalore, KA 560103		
Name of the Uns	secured Creditor			
Registered addre	ess			
E-mail Id				
Amount outstand	ding in Rs			
I/We being the U			amed company, hereby appo	
		,		
1) Name:				
Email id:				or failing him
2) Name:				
Email id:				or failing him
3) Name:			Address:	
Email id:			_	or failing him
, ,		•	-	Unsecured Creditor Meeting
		-	•	m. at Royal Orchid Central, No.
	·	ntre, Bengaluru (KA) – 560042 and at any adjour	nment thereof in respect of such
resolutions as are	indicated below:			
Resolution No.				
1.	To approve the proposed Scheme of Amalgamation between Aravon Services Private Limited,			
	CentreQ Business Services Private Limited, Coachieve Solutions Private Limited, Master Staffing			
	Solutions Private	e Limited with Ques	ss Corp Limited	
Signed this	day of		2019	
Signature of Unse	cured Creditor	Signa	ature of Proxy holder(s)	

Note: This form of proxy in order to be effective should be duly completed and deposited at the Registered Office of the Company, not less than 48 hours before the commencement of the Meeting.

> Affix Revenue Stamp of ₹1