To: The Secretary
Apollo Unit Trust Funds
P.O. Box 30389-00100
Phone 020 3641000
NAIROBI

PROXY FORM

I/We, ____________________________________________________________

of (address) ____________________________________________________

Being a unit holder of Apollo Unit Trust Funds

duly appoint ____________________________________________________

of _____________________________________________________________

or failing him/her ______________________________________________

of _____________________________________________________________

As my/our proxy to vote for me/us on my/our behalf at the Annual Unit Holders Meeting of the Apollo Asset Unit Trust Funds
to be held on FRIDAY, 28TH AUGUST 2020 electronically at 10.00 a.m. and at any adjournment thereof.

Signed/Sealed this ___________ day of __________________ 2020

_________________________________________________________________

_________________________________________________________________

NOTE:

1. In case of a corporation, the proxy must be under its common seal.

2. The proxy form should be completed and returned not later than 48 hours before the meeting or any adjournment thereof.