

# **ANNUAL MEETING PROXY**

LUBA MUTUAL HOLDING COMPANY  
2351 Energy Drive, Suite 2000  
Post Office Box 98082  
Baton Rouge, Louisiana 70898-9082  
Telephone: (225) 389-5822 / Fax: (225) 389-9333

THIS PROXY IS SOLICITED ON BEHALF OF THE MANAGEMENT AND BOARD OF DIRECTORS OF LUBA MUTUAL HOLDING COMPANY FOR VOTING PURPOSES AT THE ANNUAL MEETING OF THE MEMBERS OF LUBA MUTUAL HOLDING COMPANY TO BE HELD ON THURSDAY, DECEMBER 3, 2009 (the "Annual Meeting Date").

COMPANY NAME: \_\_\_\_\_

The undersigned hereby appoints the Board of Directors, or their designee, proxy, with full and several power of substitution, to vote all of the Member interests in LUBA Mutual Holding Company standing in the name of the undersigned and with respect to which the undersigned would be entitled to vote if personally present at the Members' Annual Meeting of LUBA Mutual Holding Company to be held on the Annual Meeting Date, and at any adjournment(s) thereof, as follows:

**1. TO RATIFY THE ACTIONS OF THE LUBA MUTUAL HOLDING COMPANY BOARD OF DIRECTORS THROUGH THE ANNUAL MEETING DATE.**

FOR                       AGAINST                       ABSTAIN

**2. TO ELECT F. CHARLES MARIONNEAUX AS DIRECTOR FOR A TWO YEAR TERM.**

FOR                       AGAINST                       ABSTAIN

**3. TO ELECT STEPHEN C. MOORE AS DIRECTOR FOR A TWO YEAR TERM.**

FOR                       AGAINST                       ABSTAIN

**4. TO ELECT CLYDE P. ROY, SR. AS DIRECTOR FOR A TWO YEAR TERM.**

FOR                       AGAINST                       ABSTAIN

THIS PROXY WILL BE VOTED IN ACCORDANCE WITH THE SPECIFIC INSTRUCTIONS ABOVE. IN THE ABSENCE OF SUCH INSTRUCTIONS, THIS PROXY WILL BE VOTED FOR THE ABOVE STATED ACTIONS AND IN ACCORDANCE WITH THE JUDGMENT OF THE PERSON VOTING THE PROXY WITH RESPECT TO ANY OTHER BUSINESS PROPERLY BEFORE THE MEETING.

The undersigned acknowledge(s) receipt of the Notice of and Agenda for Annual Meeting of Members of LUBA Mutual Holding Company and the Annual Meeting Proxy Explanation accompanying same.

Signature of Member: \_\_\_\_\_

Title and Printed Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Date: \_\_\_\_\_

**PLEASE SIGN AND DATE THIS PROXY AND BE SURE THAT YOUR POLICY NUMBER IS INCLUDED ABOVE**