



## ইসলামী ইন্স্যুরেন্স বাংলাদেশ লিমিটেড

### Islami Insurance Bangladesh Limited

Head Office: "DR Tower" (11th Floor.), 65/2/2, Purana Paltan, Dhaka-1000  
Phone: 09613888889 & 09613444445, E-mail: islamiinsurance@gmail.com

## PROXY FORM

I/We.....of.....  
.....being a member of Islami Insurance  
Bangladesh Limited do hereby appoint Mr./Mrs./Miss.....  
.....of.....  
.....as my/our proxy, to vote for me/us and on my/our behalf at the 24th Annual General  
Meeting of the Company to be held on 20th July, 2024 at 11.00 a.m. by Digital Platform (online).

Signed this..... day of ..... 2024  
Signature of Proxy: ..... Signature of Shareholder(s): .....

B.O A/c. No.: ..... B.O A/c. No: .....

N.B. : IMPORTANT:

This form of proxy, duly completed, must be deposited at least 3 working days before the meeting at the  
Company's Registered Office. Proxy is invalid if not signed and stamped as explained above.

Signature of the Shareholder and the Proxy should agree with the Specimen Signature registered with the  
Company.

As per Articles of Association of the Company, Proxy can be given only to the person who is a member  
(Shareholder) of the Company.

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## ATTENDANCE SLIP

I hereby record my attendance at the 24th Annual General Meeting of the Company being held on 20th July,  
2024 at 11.00 a.m. by Digital Platform (online).

Name of Shareholder(s)/ Proxy ..... B.O. A/c.  
No. .... holding of ..... ordinary shares  
of Islami Insurance Bangladesh Limited.

Signature of Shareholder(s)/Proxy  
Date: .....

N.B. Please present this slip at the Reception Desk.