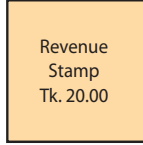


Islami Insurance Bangladesh Limited
ইসলামী ইন্স্যুরেন্স বাংলাদেশ লিমিটেড

Head Office: Rupayan Taj (2nd floor), 1, 1/1 Naya Paltan, Dhaka-1000
Tel : 8317320, 8317737 & 8317671 Fax: 88-0299331032
E-mail: islamiinsurance@gmail.com, Web: www.islamiinsurance.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 15th Annual General Meeting of the Company to be held on 13 June 2015 (Saturday) at 11.00 a.m. at Muktijoddha Smrity
Milonayaton, Institution of Diploma Engineers Bangladesh (IDEB) Bhaban, 160/A, Kakrail, VIP Road, Dhaka-1000 and any
adjournment thereof.
Signed this day of 2015.



Signature of Proxy : Signature of Shareholder(s) :
B.O A/c. No. : B.O A/c. No. :

N.B. : IMPORTANT :

1. This form of proxy, duly completed, must be deposited at least 72 hours before the meeting at the Company's Registered Office, Proxy is invalid if not signed and stamped as explained above.
2. Signature of the Shareholder and the Proxy should agree with the Specimen Signature registered with the Company.
3. AGM can be attended by the members or properly constituted proxy.

Islami Insurance Bangladesh Limited
ইসলামী ইন্স্যুরেন্স বাংলাদেশ লিমিটেড

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ATTENDANCE SLIP

I hereby record my attendance at the 15th Annual General Meeting of the Company being held on 13 June 2015 (Saturday) at
11.00 a.m. at Muktijoddha Smrity Milonayaton, Institution of Diploma Engineers Bangladesh (IDEB) Bhaban, 160/A, Kakrail,
VIP Road, Dhaka-1000

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

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

Signature of Shareholder(s) / Proxy
Date :