



ইসলামী ইন্স্যুরেন্স বাংলাদেশ লিমিটেড

Islami Insurance Bangladesh Limited

Head Office: DR. Tower (11th Floor), 65/2/2, Purana Paltan, Dhaka-1000
Phone: 880-2-55112831-33, Fax: 880-2-55112704

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 23rd Annual General Meeting of the Company to be held on 24th June, 2023 at
11.00 a.m. by Digital Platform (online).

Signed this day of 2023
Signature of Proxy :
B.O A/c. No. :

Renueue
Stamp
Tk. 20

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

N.B. : IMPORTANT:

1. 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.
2. Signature of the Shareholder and the Proxy should agree with the Specimen Signature registered with the Company.
3. 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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PROXY FORM

ATTENDANCE SLIP

I hereby record my attendance at the 23rd Annual General Meeting of the Company being held on 24th June, 2023 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.