



Islami Insurance Bangladesh Limited
ইসলামী ইন্স্যুরেন্স বাংলাদেশ লিমিটেড

Head Office : DR. Tower (11th Floor), Box Culvert Road, 65/2/2, Purana Paltan, Dhaka-1000
 Phone : 880-2-55112831-33, Fax : 880-2-55112704
 E-mail : islamiinsurance@gmail.com, Web : 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 20th Annual General Meeting of the Company to be held on 10 October, 2020 at 10.30 a.m. by
 virtually (online).

Signed this day of 2020

Signature of Proxy :
 B.O A/c. No:



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 the person who is a member (Shareholder) of the Company.



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ATTENDANCE SLIP

I hereby record my attendance at the 20th Annual General Meeting of the Company being held on 10 October, 2020 at 10.30 a.m. by virtually (online).

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 :