LIFE

Form of Proxy

I/We _____

of _____

being a member of EFU LIFE ASSURANCE LTD. hereby appoint

Mr. _____

of _____

or failing him _____

of _____

as my/our proxy in my/our absence to attend and vote for me/us and on my/our behalf at the 31st Annual General Meeting of the Company to be held on Friday, March 31, 2023 at 10:30 am and at any adjournment thereof.

Signed this _____ day of _____ 2023

WITNESS:

1. Signature: _____
   Name: _____
   Address: _____
   _____
   CNIC or
   Passport No: _____

2. Signature: _____
   Name: _____
   Address: _____
   _____
   CNIC or
   Passport No: _____

Revenue Stamp

Signature of Member(s)

Shareholder's Folio No. _____
and/or CDC
Participant ID. No. _____
and Sub Account No. _____

Important:

This form of Proxy, duly completed, must be deposited at the Company's Registered Office at Al-Malik Centre, 70 W, F-7/G-7 Jinnah Avenue (Blue Area), Islamabad not later than 48 hours before the time appointed for the meeting.

CDC Shareholders and their Proxies are each requested to attach attested photocopy of their Computerised National Identity Card (CNIC) or Passport with this proxy form before submission to the Company.

CDC Shareholders or their Proxies are requested to bring with them their Original Computerised National Identity Card or Passport along with the Participant's ID number and their account number at the time of attending the Annual General Meeting in order to facilitate their identification.