



Your Trusted Risk Manager

**SENA KALYAN INSURANCE COMPANY LIMITED**  
সেনা কল্যাণ ইন্স্যুরেন্স কোম্পানী লিমিটেড

**HEAD OFFICE:**

SKS Tower (12<sup>th</sup> Floor)  
7, VIP Road, Mohakhali, Dhaka-1206.  
PABX: + 88 02 5505855  
+88 02 5505856 +88 02 5505857  
FAX: + 88 02 5505858

**Proxy Form**

I/We .....  
of ..... being a member of **Sena Kalyan Insurance Company Limited** and a holder of ..... shares do hereby appoint Mr./Ms ..... of ..... as my/our proxy to vote for me/us and on my/our behalf at the **10<sup>th</sup> Annual General Meeting (Virtual)** of the Company to be held on **May 09, 2023 (Tuesday)** and any adjournment thereof.

Signed this ..... day of ..... 2023.

Signature .....

Signature .....

Name .....

Name .....

Folio/BO ID No. ....

Folio/BO ID No. ....

Member

Revenue  
Stamp

Proxy

**NOTES:**

- 1) This form of proxy, duly completed, must be deposited at least 48 hours before the meeting at the registered office. Proxy is invalid if not duly signed and stamped.
- 2) Signature of the Shareholders should agree with the Specimen Signature registered with the Company and Depository Register.



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**Attendance Slip**

I/We hereby record my/our attendance at the **10<sup>th</sup> Annual General Meeting (Virtual)** of **Sena Kalyan Insurance Company Limited** on **May 09, 2023 (Tuesday)** at 11.00 a.m. by using online digital platform as a holder of ..... shares of the Company.

Signature .....

Name .....

(Member/Proxy)

Folio/BO ID No. ....