Delta Life		Insurance C Central Offi ta Life Tower, Plot # Gulshan Circle-2, D	ce 37, Road	# 90	≽d	
(Limited)	F	PROXY/Authoriza	tion Fori	n		
I/We of			of			
Insurance Company Limite	ed do hereby	appoint Mr./Mrs				of
					or failing	g him /her
Mr./Mrs		of				
					as my/	our Proxy,
to attend and vote on my	/ our behalf at	t the 35 th Annual Ge	neral Meet	ting of the Cor	npany to be h	eld on 10 th
December, 2023 at 11.30 /	A.M. at virtual	ly through video con	ference ar	nd at any adjou	urnment there	of.
As wished, I/We have atte		e of the Proxy Holder Revenue Stamp Tk. 100.00	(1)	day of		2023.
Signature of the Sharehold	ier(s)		¹ (2)			
No. of Shares held :			Sign	ature of the P	roxy Holder(s)	
Folio No.						
BO ID No.						
E-mail of Shareholder						
Mobile of Shareholder						
E-mail of Proxy Holder(1)						
Mobile of Proxy Holder(1)						
E-mail of Proxy Holder(2)						
Mobile of Proxy Holder(2)						

NOTE:

- 1. A Member entitled to attend and vote at the 35thAnnual General Meeting (AGM) may appoint a PROXY to attend and vote on his/her behalf.
- 2. Signature of the Shareholder(s) must agree with the Specimen Signature recorded with the Company.
- 3. The Honorable Shareholder (s) will submit their Proxy form through online/Manual no later than 48 hours before commencement of the AGM i.e 8th December, 2023 at 11.30 A.M. Proxy is invalid if not signed and stamped as explained above.