

Form of Proxy

I/We, of Ord Manufacturing Modaraba, holder of Ord 	being a member of First Treet linary shares as per Register Folio No.
For beneficial owners as per CDC List	
CDC Participant I.D No	Sub Account No
CNIC No	
Passport No	
Hereby Appoint Mr. /Mrs. /Miss her Miss / Mrs / Mr. of	of person or failing him /
another person on my / our proxy to attend and vote for me / us and my / our behalf at Annual Review Meeting of the Modaraba to be held on Monday, October 28^{th} , 2024 at $10:30$ AM and at every adjournment thereof, if any	
	Please affix Rupees
	Fifty Revenue Stamp
	(Signature should agree with specimen Signature registered with the Modaraba)
Signed this day of October 2024 Signature of Certificate holder	
	Signature of Proxy
1. WITNESS Signature:	2. WITNESS Signature:
Name:	Name:
Address:	Address:
CNIC #	CNIC#

- This Proxy Form. Duly completed and signed, must be received at above mentioned address the Registered Office of the Modaraba, not less than 48 hours before the time of holding the meeting.
- If a member appoints more than one proxy and more than one instruments of proxy are deposited by a member with the Modaraba, all such instruments of proxy shall be rendered invalid.
- 3. For CDC Account Holders / Corporate Entities in addition to the above the following requirements have to be met;
- i. Attested copies of CNIC or the Passport of the beneficial owners and the proxy shall be provided with the proxy forms.
- ii. The proxy shall produce his original CNIC or original Passport at the time of the meeting.
- iii. In case of a corporate entity, the Board of Directors resolution/power of attorney with specimen signature shall be submitted (unless it has been provided earlier) along with proxy form to the Modaraba.