Form of Proxy

| /We, holder of | of be Ordinary shares as per Register F | ing a member of First Treet Ma Folio No | nufacturing Modaraba, |
|---|--|--|--|
| For beneficial owners as per CDC List | | | |
| | CDC Participant I.D No CNIC No | Sub Account No | |
| | Passport No | | |
| Hereby Appoint Mr. /Mrs. /Miss of person or failing him / mer Miss / Mrs / Mr of of person or failing him / mer Miss / Mrs / Mr of of 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 27th, 2025 at 10:00AM and at every adjournment thereof, if any | | | |
| | | | Please affix Rupees Fifty Revenue Stamp |
| | | | d agree with specimen ed with the Modaraba) |
| Signed thisday of October 2025 Signature of Certificate holder Signature of Proxy | | | |
| 1. WITNES | s | WITNESS | |
| Nan | nature: | Signature: Name: Address: | |
| CNI | C# | 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.
- 2. 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;
- 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.