

FORM OF PROXY

34th Annual General Meeting
Shifa International Hospitals Limited

I/We _____
of _____
being a member of Shifa International Hospitals Ltd. Folio No./CDC A/c No. _____
No. of Shares _____ hereby appoint _____
of _____ Folio No./CDC A/c No. _____
or failing him/her _____
of _____ Folio No./CDC A/c No. _____
who is a member of the Company as my/our proxy in my/our absence to attend and vote for me/us
and on my/our behalf at the 34th Annual General Meeting of the Company to be held at 1100 hours
on Tuesday, October 27, 2020, and at any adjournment thereof.

As witness my hand this _____ day of _____ 2020.

Signed by the said _____



(Signature must agree with
the **SPECIMEN** signature
registered with the Company)

Witnesses:

1 Signature _____
Name _____
Address _____

CNIC/Passport No. _____

2 Signature _____
Name _____
Address _____

CNIC/Passport No. _____

Important:

1. This form of Proxy, duly completed, signed and stamped must be deposited at the Company's Registered Office, Sector H-8/4 Islamabad, 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 Company, all such instruments of proxy shall be rendered invalid.
3. CDC account holder, sub account holder/shareholder may appoint proxy and the proxy must produce attested copy of his/her CNIC or original passport at the time of attending the meeting.

AFFIX
CORRECT
POSTAGE

The Company Secretary
Shifa International Hospitals Limited
Sector H-8/4, Islamabad