

## **Proxy Form**

being a member of Dawood Hercules Corporation Limited holder of Ordinary Shares, as per:  Share Register Folio No and/or	I/We			
Share Register Folio Noand/or CDC Participant IDNoofas my/our proxy to atte speak, and vote for me/us and on my/our behalf, at the Annual General Meeting (AGM) of Company to be held on Friday, April 26, 2024 at 10:30 AM at the Karachi School of Busin and Leadership (KSBL) situated at National Stadium Road, opp Liaquat National Hosp Karachi - 74800 and via video link facility, and at any adjournment thereof.  Signed this 2024.  WITNESSES -1: Signature: Address: Signature on Revenue Stamps of Rupees Five  WITNESSES -2: Signature: Signature withe specimen signature withe Company.  Address: Signature withe Company.	of	being a member of Dawood Hercules Corporation L	imited and	
CDC Participant IDNo	holder of	Ordinary Shares, as per:		
WITNESSES -1:  Signature: Name: Address: CNIC No. or Passport No.  WITNESSES -2: Signature: Name: Name: Address: CNIC No. or  Signature on Revenue Stamps of Rupees Five  Signature should agree we the specimen signature we the Company.  Address: CNIC No. or	CDC Participant IDNo hereby appoint speak, and vote for me/us a Company to be held on Fricand Leadership (KSBL) situ	Sub A/c Noas my/our proxy ofas my/our proxy as my/our behalf, at the Annual General Meeting (Alay, April 26, 2024 at 10:30 AM at the Karachi School of ated at National Stadium Road, opp Liaquat Nationa	to attend, GM) of the f Business	
WITNESSES -1:  Signature: Name: Address: CNIC No. or Passport No.  WITNESSES -2: Signature: Name: Name: Address: CNIC No. or	Signed this	day of 2024		
Signature: Name: Address: CNIC No. or Passport No.  WITNESSES -2: Signature: Name: Name: Address: CNIC No. or  Signature on Revenue Stamps of Rupees Five  Signature should agree w the specimen signature w the Company.	0.9.100 0.10	2027.		
Signature: Name: Address: CNIC No. or Passport No.  WITNESSES -2: Signature: Name: Name: Address: CNIC No. or  Signature on Revenue Stamps of Rupees Five  Signature should agree w the specimen signature w the Company.				
Name: Address: CNIC No. or Passport No. Signature on Revenue Stamps of Rupees Five  WITNESSES -2: Signature: Name: Name: Address: CNIC No. or	WITNESSES -1:			
Name: Address: CNIC No. or Passport No. Signature on Revenue Stamps of Rupees Five  WITNESSES -2: Signature: Name: Name: Address: CNIC No. or	Signature:			
CNIC No. or Passport No.  WITNESSES -2: Signature: Name: Address: CNIC No. or  Signature on Revenue Stamps of Rupees Five  Signature should agree w the specimen signature w the Company.	Name:			
Passport No.  Revenue Stamps of Rupees Five  WITNESSES -2:  Signature:  Name:  Address:  CNIC No. or	Address:			
Passport No.  Revenue Stamps of Rupees Five  WITNESSES -2:  Signature:  Name:  Address:  CNIC No. or	CNIC No. or	Signature c	n	
MITNESSES -2:  Signature: Name: Address: CNIC No. or				
Signature: Signature with the specimen signature with the Company.  Address: CNIC No. or	1 doopon 110.		•	
Signature: Signature with the specimen signature with the Company.  Address: CNIC No. or	WITNESSES -2:			
Name: the Company.  Address: CNIC No. or		· · · · · · · · · · · · · · · · · · ·	_	
Address:  CNIC No. or	Signature:			
CNIC No. or	Name:		ıy.	
5.75 7.55 7.	Address:			
Passport No.	CNIC No. or			
	Passport No.			

## IMPORTANT:

- 1. This Proxy Form, duly completed, must be deposited at the Company's Registered Office, not less than forty-eight (48) hours before AGM.
- CDC shareholders and their proxies are requested to attach and attested photocopy of their valid Computerized National Identity Card (CNIC) or Passport with this proxy form before submission to the Company.
- 3. All proxies attending the AGM are requested to bring their original CNIC/Passport for identification.

