## **FORM OF PROXY**

The Company Secretary
Gillette Pakistan Limited
11th Floor, The Harbour Front,
Dolman City, HC-3, Block 4,
Abdul Sattar Edhi Avenue, Clifton,
Karachi -75600, Pakistan.

Tel: + (92 21) 3520 5088 Fax: + (92 21) 3529 6150

I/We		S/W/D of					being a member			
			Company) and holder of							
No		and/o	r CDC Participant ID	No		_ and	Sub	Account	No.	
		hereby	appoint				(	Name)	of	
			-					_ (full add	dress)	
or	failing	him/her _		(Name)						
			(full addr		our proxy t	o attend	d, spea	ak and vo	te for	
me/us	s and or	n my/our behal	lf, at the Extra Ordinary	General M	eeting of t	he Com	npany	to be he	ld on	
Decen	nber	, 2020, at Kara	achi and at any adjourr	ment there	of. As witr	nessed	given	under m	y/our	
hand(	s)	day of	, 2020.							
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 Signat	ure of M	 1embers								
Signat		Terribers								
Witne	esses:									
1. Sig	nature:			2. Signatı	ıre:					
					.:					
	lress:			Addres						

## NOTE:

- 1. In order to be effective, this form of proxy duly completed, stamped, signed and witnessed along with power of attorney, or other instruments (if any), must be deposited at the registered office of the company at least 48 hours before the time of the meeting.
- 2. In case of proxy for an individual beneficial owner of shares from CDC, attested copies of beneficial owner's computerized national identity card (CNIC) or passport, account and participant's ID numbers must be deposited along with the form of proxy. In case of proxy for representative of corporate members from CDC, Board of Directors' resolution and power of attorney and the specimen signature of the nominee must be deposited along with the form of proxy. The proxy shall produce his / her original CNIC or passport at the time of meeting.