## **Proxy Form**

		Folio No. / CDC Account No.
I/W	e	(NAME
		(FULL ADDRESS
in t	he district of	
beir	ng a member / members of BOLAN CASTINGS LI	ITED and a holder of
	Shares No	hereby appoin
		(NAME
of _		(FULL ADDRESS
Sigr	24 at 12:30 p.m. and / or at any adjournment thereof.  med this	day of 2024
1.	Signature:	
	Name:	
	Address:	
	CNIC or Passport No:	Signature on Revenue Stamp
2.	Signature:	· ·
	Name:	(Signature should agree with specimen signature registered with the Company)
	CNIC or Passport No:	

## Important:

- 1. A member entitled to attend and vote at the Annual General Meeting of the Company is entitled to appoint a proxy to attend and vote instead of him / her.
- 2. The instrument appointing a proxy should be signed by the member (s) or by his / her attorney duly authorised in writing, or if the member is a corporation / company either under the common seal, or under the hand of any officer or attorney so authorised.
- 3. This Proxy Form, duly completed, must be deposited at the Registered Office of the Company, Main RCD Highway, Hub Chowki, District Lasbela, Balochistan not less than 48 hours before the time of holding of the meeting.