

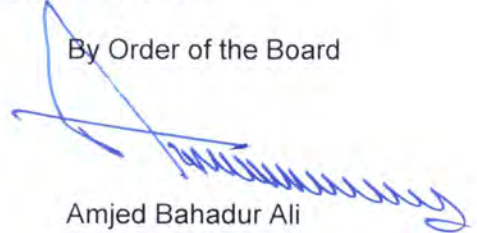
**NOTICE OF ANNUAL GENERAL MEETING**

Notice is hereby given that the 16<sup>th</sup> Annual General Meeting of the Shareholders of **Allianz EFU Health Insurance Ltd.** will be held at D-136, Block-4, KDA Scheme-5, Clifton, Karachi on Tuesday March 8, 2016 at 12 noon to:-

**Ordinary Business:**

1. confirm the minutes of the 15th Annual General Meeting held on April 14, 2015 and Extra Ordinary General Meeting held on October 12, 2015.
2. receive, consider and approve the Audited Financial Statements of the Company for the year ended December 31, 2015, together with the Directors' and Auditors' reports thereon.
3. consider and if thought fit to approve the payment of Dividend at the rate of Rs. 4.00 per share for the year ended December 31, 2015 as recommended by the Board of Directors.
4. appoint Auditors of the Company for the year 2016 and fix their remuneration.
5. transact any other matter with the permission of the Chair.

By Order of the Board



Amjed Bahadur Ali  
**Corporate Secretary**

February 15, 2016

**NOTES**

1. A member entitled to attend and vote at the General Meeting is entitled to appoint another member as a proxy to attend and vote in respect of him. Form of proxy must be deposited at the Company's Registered Office not later than 48 hours before the time appointed for the meeting.
2. CDC Account holders are advised to follow the following guidelines of the **Securities and Exchange Commission of Pakistan.**

***For attending the meeting:***

- In case of individuals, the account holder shall authenticate his identity by showing his original Computerized National Identity Card (CNIC) or original passport at the time of attending the meeting.
- In case of corporate entity, the Board of Directors' resolution/power of attorney with specimen signature of the nominee shall be produced (unless it has been provided earlier) at the time of the meeting.

**Head Office:**

D-136, Block-4, KDA Scheme-5,  
Clifton, Karachi-75600  
Tel: 021-111-HEALTH (111-432-584)  
Call Centre: 021 111-HELP-00  
(111-4357-00)  
Fax: (021) 3586-4020, 3586-0403

**Central Marketing**

**& Sales Office:**  
Suite # 103 & 104, 1st Floor,  
Fayyaz Centre, Main Shakra-e-Faisal  
Karachi-74400  
Tel: 021-3455-0995-8  
Fax: (021) 3455-0974

**Islamabad Office:**

Suite # 103, 1st Floor,  
Muhammad Gulistan Khan House,  
82-East, Fazal-e-Haq Road,  
Blue Area, Islamabad-44000  
Tel: 051-111-HEALTH (111-432-584)  
Fax: (051) 280-2202

**Lahore Office:**

Office No. 3, 75-D-1,  
Liberty Roundabout,  
Gulberg-III, Lahore-54000  
Tel: 042-111-HEALTH  
(111-432-584)  
Fax: (042) 3587-0651



***For appointing proxies:***

- In case of individuals, the account holder shall submit the proxy form as per the above requirement.
  - The proxy form shall be witnessed by two persons whose names, addresses and CNIC numbers shall be mentioned on the form.
  - Attested copies of CNIC or the passport of the beneficial owners and the proxy shall be furnished with the proxy form.
  - The proxy shall produce his original CNIC or original passport at the time of the meeting.
  - In case of corporate entity, the Board of Directors' resolution/power of attorney with specimen signature shall be submitted (unless it has been provided earlier) alongwith proxy form to the Company.
3. The Share Transfer Books of the Company will be closed from March 2, 2016 to March 8, 2016 (both days inclusive).
  4. Members are requested to communicate to the Company of any change in their addresses.

**ALLIANZ EFU HEALTH INSURANCE LIMITED**  
*Form of Proxy*

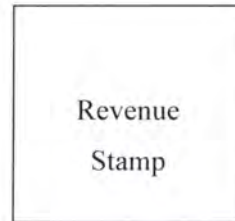


I/We \_\_\_\_\_  
of \_\_\_\_\_  
being a member of **ALLIANZ EFU HEALTH INSURANCE LIMITED**, holding \_\_\_\_\_ ordinary shares  
hereby appoint Mr. /Mrs. \_\_\_\_\_ of  
\_\_\_\_\_ or  
failing him Mr. /Mrs. \_\_\_\_\_ of  
\_\_\_\_\_ as  
my/our proxy in my/our absence to attend and vote for me/us and on my/our behalf at the Annual/Extra  
Ordinary General Meeting of the Company to be held on \_\_\_\_\_ and at any  
adjournment thereof.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 2016.

**WITNESSES:**

1. Signature: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_   
CNIC or  
Passport No. \_\_\_\_\_



Signature of Member(s)

2. Signature: \_\_\_\_\_  
Name: \_\_\_\_\_ Shareholder's Folio No. \_\_\_\_\_  
Address: \_\_\_\_\_ and /or CDC  
\_\_\_\_\_ Participants I.D. No. \_\_\_\_\_  
CNIC or \_\_\_\_\_ and Sub Account No. \_\_\_\_\_  
Passport No. \_\_\_\_\_

**Important:**

This form of Proxy, duly completed, must be deposited at the Company's Registered Office at D-136, Block-4, KDA Scheme-5, Clifton, Karachi, not later than 48 hours before the time appointed for the meeting.

CDC Shareholders and their Proxies are each requested to attach attested photocopy of their Computerized National Identity Card (CNIC) or Passport with this proxy form before submission to the Company.

CDC Shareholders or their Proxies are requested to bring with them their Original Computerized National Identity Card or Passport along with the participant's ID number and their account number at the time of attending the Annual General Meeting in order to facilitate their identification.