

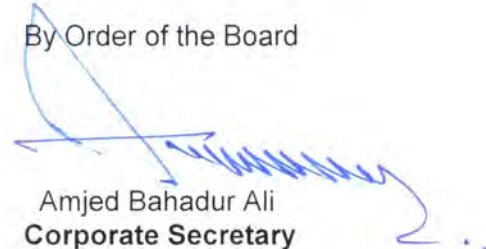
NOTICE OF ANNUAL GENERAL MEETING

Notice is hereby given that the 18th 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 Thursday March 8, 2018 at 12 noon to:-

Ordinary Business:

1. confirm the minutes of the 17th Annual General Meeting held on March 15, 2017.
2. receive, consider and approve the Audited Financial Statements of the Company for the year ended December 31, 2017, 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. 1.50 per share i.e. 15% for the year ended December 31, 2017 as recommended by the Board of Directors.
4. appoint Auditors of the Company for the year 2018 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, 2018

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 Shahra-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. 28A, 2nd Floor
I.T. Tower, Hali Road,
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, 2018 to March 8, 2018 (both days inclusive).
 4. Revised Treatment of withholding Tax:
Please note that under Section 150 of the Income Tax Ordinance, 2001 and pursuant to Finance Act 2017, effective July 01, 2017, withholding tax on dividend income will be deducted for 'Filer' and 'Non-Filer' shareholders @ 15% and 20% respectively.
 5. Members are requested to communicate to the Company of any change in their addresses.

ALLIANZ EFU HEALTH INSURANCE LIMITED
Form of Proxy



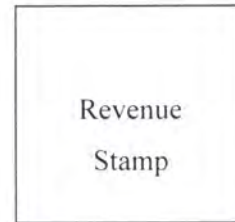
I/We _____
of _____
being a member of **ALLIANZ EFU HEALTH INSURANCE LIMITED**, holding _____ ordinary shares
hereby appoint Mr. /Mrs. _____ of
_____ or
failing him Mr. /Mrs. _____ of
_____ as
my/our proxy in my/our absence to attend and vote for me/us and on my/our behalf at the Annual/Extra
Ordinary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

Signed this _____ day of _____ 2018.

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.

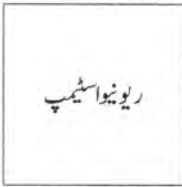
CDC Shareholders or their Proxies are requested to bring with them their Original Computerized National Identity Card or Passport along with the participant's ID number and their account number at the time of attending the Annual General Meeting in order to facilitate their identification.

الیانز ای ایف یو ہیلتھ انشورنس لمیٹڈ پراسی فارم

میں/ہم _____
 ساکن _____
 بحیثیت ممبر الیانز ای ایف یو ہیلتھ انشورنس لمیٹڈ بذریعہ ہڈا مسمی _____
 ساکن _____
 کو یا ان کی عدم دستیابی کی صورت میں مسمی _____
 ساکن _____
 کو اپنی/ہماری جانب سے پراسی مقرر کر رہا/رہی ہوں تاکہ وہ _____ سالانہ اجلاس عام/
 غیر معمولی اجلاس عام یا اس کے کسی بھی التواء میں میری/ہماری جگہ شرکت کرے اور ووٹ ڈالے۔

دستخط بروز _____ بتاریخ _____ ۲۰۱۸ء

گواہان:



ممبر (ممبران) کے دستخط

۱۔ دستخط: _____

نام: _____

پتہ: _____

سی این آئی سی یا پاسپورٹ نمبر _____

۲۔ دستخط: _____

نام: _____

پتہ: _____

سی این آئی سی یا پاسپورٹ نمبر _____

اہم نوٹ:

پراسی کا یہ فارم جو ہر طرح سے مکمل ہو، لازماً کمپنی کے رجسٹرڈ آفس واقع D-136 بلاک 4 کے ڈی اے اسکیم 5 کلنٹن کراچی میں اجلاس کے طے شدہ وقت سے کم از کم ۴۸ گھنٹے قبل جمع کرادیا جائے۔

سی ڈی سی شیئر ہولڈرز اور ان کے پراسیز سے درخواست ہے کہ ہر ایک اپنے کمپیوٹرائزڈ قومی شناختی کارڈ (سی این آئی سی) یا پاسپورٹ کی مصدقہ نقل کمپنی کو پراسی فارم جمع کرانے سے قبل اس کے ساتھ منسلک کرے۔

سی ڈی سی شیئر ہولڈرز یا ان کے پراسیز سے درخواست ہے کہ اپنے اصل کمپیوٹرائزڈ قومی شناختی کارڈ یا پاسپورٹ بشمول پارٹیشننگ کارڈ (سی ڈی نمبر اور ان کے اکاؤنٹ نمبر اپنی شناخت میں سہولت کی غرض سے سالانہ اجلاس عام میں شرکت کے وقت ہمراہ لائیں۔