## NOON SUGAR MILLS LIMITED

## **FORM OF PROXY**

		Registered Folio No. / CDC Account No	
I/We			
., , , , ,	·	(Name)	
of			
		(Address)	
bein	g a member of NOON SU	GAR MILLS LIMITE	D hereby appoint
ot		(Name)	
01		(Address)	
or fa	iling him		
	J	(Name)	
of			
		(Address)	
Meet Janu	ting of the Company to be he lary 27, 2025 at 11:30 a.m. and	ld at 66-667-A, Garden Blo I at any adjournment thereof.	
As witness my hand this		day of	2025
	WITNESSES	Signature of the	ne Shareholder/ Appointer
1.	Signature		
	Name		
	Address		
	CNIC #		
2.	Signature		Revenue Stamp
	Name		Rs. 50/-
	Address		
	CNIC #		

**NOTE:** Proxies in order to be effective must reach the Company's Registered Office not less than 48 hours before the time for holding the meeting and must be duly stamped, signed and witnessed. Proxies of the Members through CDC shall be accompanied with attested copies of their CNIC.