

**PROXY REVOCATION FORM**

SHAREHOLDER DETAILS	
Full Name:	
Address:	
NIC/PP/Bus. Reg No:	
Contact No:	
No. of Shares Held:	

DECLARATION	
I, the undersigned Member of Amana Takaful (Maldives) PLC declare that I wish to revoke the following proxy holder;	
Which I had appointed through my ..... (date) proxy form.	
Date:	
Shareholder signature:	
Company Seal:	

**Please submit the duly completed form to the Registered Office of the Company, H. Palmayrah, Sosun Magu, Male', Maldives or email to [investor.relations@takaful.mv](mailto:investor.relations@takaful.mv) not later than 21st May 14:30hrs.**