



أليانز السعودي الفرنسي
Allianz Saudi Fransi



Power of Attorney Form

Dear Shareholders;

Date of Execution of the Power of Attorney:

Corresponding to:

I, the shareholder (principal's full name), nationality () under National ID No. () or (residence or passport number for non-Saudis), issued by () in my capacity (personal / authorized signatory) for / the Director / Chairman of the Board of Directors of (name of the principal company) and the owner of (number) shares in Allianz Saudi Fransi Cooperative Insurance Company according to the Commercial Register of the Saudi Joint Stock Company registered in the Commercial Register of (name of the city) under No. (C.R. No.) and in accordance with the provisions of Article No. 25 of the Company's Articles of Association,

do hereby appoint (agent's full name) to act on my behalf to attend the (first meeting) Ordinary General Assembly Meeting of the Company, which is scheduled to be held at the company's headquarters in Al Safwa Commercial Building - Khurais Road - near the Gulf Bridge - Malaz – Riyadh, Kingdom of Saudi Arabia at 6:30 PM, on Tuesday 03/06/1444 AH (um Al-Qura time) corresponding to 27/12/2022 AD. Moreover, the agent is authorized to vote on my behalf on the items on the agenda and other items that the General Assembly may put to a vote on, and to sign on my behalf all resolutions and documents related to these meetings. This power of attorney shall be considered valid for this meeting or any subsequent postponed meeting.

Executed & Signed by:	
Capacity:	Civil registration number of the person signing the PoA (or residence or passport number for non-Saudis):
Principal's Signature (in addition to the official seal if the owner of the shares is a legal person):	