

Dear Members of the Nominations and Remuneration Committee Amana Cooperative **Insurance Company**

May the peace, mercy, and blessings of God be upon you...

Subject: Application for candidacy for membership in the Board of Directors for the next term, commencing 11 August 2025.

With reference to the policy of the procedures for nominating members of the Board of Directors and its committees (the Company) and the provisions of the rules, regulations, policies and procedures issued by the supervisory and regulatory authorities, I, the undersigned, hereby submit my desire to run for membership in the Company's Board of Directors for the sixth (upcoming) session, which will begin on 11 August 2025 and ends on 10 August 2029. I enclose herewith all the required documents and data referred to in the company's announcement published on the Saudi Stock Exchange (Tadawul) website. I also confirm the following:

- I have reviewed the conditions for nomination for membership in the Board of Directors of the company announced in accordance with the regulations and systems issued by the supervisory authorities.
- That all information, data and signatures contained in this form and in the documents attached thereto are complete, correct and not misleading, and I bear full responsibility and legal consequences in the event that the opposite is proven or is incorrect, and I bear full responsibility for Amana Cooperative Insurance Company and I pledge to compensate it for any material or moral damage that may befall it as a result.
- Attach all required documents and forms referred to in the company's announcement with this application.
- I am fully prepared to devote the time and effort required to assume this position and perform all the duties assigned to it by all regulatory, supervisory and legislative authorities.
- I acknowledge that I have read and complied with all relevant rules and regulations.
- I acknowledge that the company's communications and correspondence at the addresses and contact methods specified in this form or the attached forums constitute proper notification to me and are legally binding. I pledge to notify the company in writing of any changes to these terms, and I bear responsibility for failure to do so.
- I agree not to disclose any company-related information throughout my membership.

Approval of the nominated member	
	Name
	Signature
	Date

Amana Cooperative Insurance Company

P.O.Box 27986, Rivadh 11427 Kingdom of Saudi Arabia