Proxy Form



I/W	/e				
of _					
bein	g a member of INTERNATIONAL IND	USTRIES LIMITED	and holder of		
ordinary shares as per Share Register Folio No		loa	_and / or CDC Participant I.D. No		
		and Sub Acco	ount No		
here	by appoint			_ of	
		or failing him			
of _					
	ny proxy to vote for me and on my September, 2018 at 11:30 am at Be eof.				
Signed this		ay of	2018		
WITI	NESS:				
1	Signature				
	Name				
	Address CNIC / Passport No		G	Revenue Stamp	
2	Signature		(Signature should agree with the specimen signature registered with the Company)		
	Address				
	CNIC / Passport No.				

Note: Proxies in order to be effective must be received by the Company not less than 48 hours before the meeting. A proxy must a member of the Company.

CDC Shareholders and their proxies are each requested to attach an attested photocopy of their CNIC or Passport with this proxy form before submission to the Company.