

Nomination Form

The Chief Executive Officer/Compliance Officer
Bhutan Insurance Limited
Chorten Lam
Post Box No.:- 779
Thimphu: Bhutan

I/We nominate the following person(s) for election of directors

Name of Candidate:

Candidate's mailing address:

Telephone Number:

Mobile Number:

Fax Number:

Email Address:

CID Number:

Nominated by (Please tick): **A) Royal Government of Bhutan** **B) Board** **C)**
Shareholders

Full name of shareholder(s)*

Address ID Card No.
Signature Certificate of Incorporation
& Date/RSEB Code NO.

- 1.
- 2.
- 3.
- 4.
- 5.

Place:

Date: