



The Insular Life Assurance Company, Ltd.

NOTICE OF THE 2018 ANNUAL REGULAR MEMBERS' MEETING

Notice is hereby given that the 2018 Annual Regular Members' Meeting of **The Insular Life Assurance Company, Ltd.** will be held on Wednesday, 23 May 2018 at 4:15 P.M. at the Insular Life Corporate Centre, Insular Life Drive, Filinvest Corporate City, Alabang, Muntinlupa City with the following agenda:

1. Proof of Notice of Meeting;
2. Determination of Quorum;
3. Reading and Approval of the Minutes of the 2017 Annual Regular Members' Meeting held on 24 May 2017;
4. Annual Report to Policyholders;
5. Ratification of all the Acts and Resolutions of the Executive Committee and the Board of Trustees from the date of the last Annual Regular Members' Meeting up to the date of this meeting;
6. Election of three (3) Trustees;
7. Appointment of External Auditor and fixing of its remuneration; and
8. Adjournment.

[The Details and Rationale of the Agenda](#) is available on the Company's website.

A record of the acts and resolutions of the Executive Committee and the Board of Trustees are with the Office of the Corporate Secretary and may be examined by any Member interested. A [summary of these resolutions](#) is shown in the Company's website. The [profiles of the candidates for election as Trustees](#) are likewise disclosed in the website.

Every qualified Member who owns an insurance policy in force for at least one (1) year as of thirty (30) days prior to 23 May 2018, or as of **23 April 2018**, is entitled to vote. Such Member shall be entitled to one (1) vote only at such meeting or any adjournment thereof, regardless of the number of policies or amount of insurance he owns.

The voting procedure for all resolutions shall be by poll or other applicable methods as may be determined by the Chairman of the Meeting. The votes shall be tabulated electronically.

Any Member entitled to vote may be present in person, or represented by proxy. A proxy may be appointed by using the form below, or a copy thereof. The proxy form is also available at our Head Office- Office of the Corporate Secretary, at any of our District Offices or may be downloaded from the Company website (<https://www.insularlife.com.ph>). No Members' proxy shall be recognized unless a duly signed proxy form has been filed with the Office of the Corporate Secretary or at any of our District Offices at least ten (10) working days before the date of the Meeting at which the proxy will attend, or not later than 09 May 2018. The presence of a Member at the Annual Regular Members' Meeting revokes the proxy for such meeting.

To facilitate proper identification, please bring any government-issued identification document (Passport, Driver's License, SSS/GSIS/BIR IDs or other similar documents).

Signed this 25th day of April 2018 at Muntinlupa City.

(Sgd.)

Atty. RENATO S. DE JESUS
Corporate Secretary

INSTRUCTIONS: Please accomplish the Proxy Form below and detach and submit it to the Office of the Corporate Secretary at the Insular Life Head Office or to any of our District Offices most convenient to you on or before 09 May 2018.

PROXY

Know All Men By These Presents:

That I, the undersigned policyholder and member of The Insular Life Assurance Company, Ltd., do hereby nominate, constitute and appoint (please check one):

- Proxy Committee pursuant to Section 3.4.2 of the Company's By-Laws, as amended (with the Executive Committee Chairman, the President and the Corporate Secretary, as members thereof, or in case of concurrence of any two of the foregoing positions in one persons, then the Chairman of the Board becomes a member of the Proxy Committee) or any one of them, if only one be present, or the Board Chairman; or

_____ (Please indicate name of designated proxy)

as my proxy to vote at the Annual Regular Members' Meeting of the Company on 23 May 2018, and any adjournment thereof, as fully for all intents and purposes, as I could lawfully do if present and acting in person. In case of non-attendance of my designated proxy, I authorize and empower the Chairman of the Meeting to fully exercise all rights as my proxy at such meeting.

Signed this _____ day of _____, 2018 at _____.

Policy Number/s:

Signature over Printed Name of Policyholder/Member