Affix Stamp Duty Baht 20

## PROXY FORM A (SIMPLE FORM) According to Regulation of Department of Business Development Re: Form of Proxy (no. 5) B.E. 2550

		Written a	t		
		Date	Month	Ye	ar
(1)	I/We		Natio	onality	
					le
(2)	Being the shareholder	of <b>Nonthavej I</b>	Hospital Publ	ic Company I	Limited,
. ,	_	_	•	• •	votes, as
follows:			,		
	ares of	shares, eligil	ole for		votes
	shares of				
		, 3			
(3)	do here by appoint eith	her one of the fo	ollowing persor	ns:	
( )					s, Residing at No
Road					
Province	Postal	Code	or		
	(2) Name		Aq	evears	s, Residing at No
Road					
	Postal				
				evears	s, Residing at No
Road					
	Postal				

As only one of my/our proxy to attend and vote on my/our behalf at the Annual General Meeting of Shareholders No. 1/2024 of Nonthavej Hospital Public Company Limited on **Thursday 25 April 2024 at 10.00 hours** at Meeting Room on 6th fl., Nonthavej, no. 432 Ngamwongwan Road , Bangkhen, Nonthaburi or at any adjournment thereof to any other date, time and venue.

Any act performed by the proxy at such meeting shall be deemed as my/our own act in all respects.

	(	
Signed	(	Proxy )
Signed	(	Proxy )
Signed	(	Proxy )

## Remarks:

The shareholder assigning the Proxy must authorize only one proxy to attend and vote at the meeting and shall not allocate the number of shares to several proxies to vote separately.