

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

Written at.....
Date.....Month.....Year.....

(1) I/We.....Nationality
Residing at No.....Road..... Sub-district.....
District..... Province..... Postal Code
Country

(2) Being the shareholder of **Nonthavej Hospital Public Company Limited**,
holding the total amount of.....shares, eligible for votes, as
follows:
Ordinary shares of..... shares, eligible for votes
Preference shares of..... shares, eligible for votes

(3) do here by appoint either one of the following persons:
(1) Name..... Age.....years, Residing at No.....
Road Sub-district District
Province Postal Code or
(2) Name..... Age.....years, Residing at No.....
Road Sub-district District
Province Postal Code or
(3) Name..... Age.....years, Residing at No.....
Road Sub-district District
Province Postal Code

As only one of my/our proxy to attend and vote on my/our behalf at the Annual General Meeting of
Shareholders No. 1/2025 of Nonthavej Hospital Public Company Limited on **Friday 25 April 2025 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 Grantor
(.....)

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.