



Enquiries submission prior to the 2025 Annual General Meeting of Shareholder  
Ratchaphruek Hospital Public Company Limited

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Number of Shareholding: as of \_\_\_\_\_

Individual

Corporate Question:

Question:

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Sign \_\_\_\_\_ Shareholder

( \_\_\_\_\_ )