

เลขที่ 44/543-544 ถนนพหลโยธิน แขวงอนุสาวรีย เขตบางเขน กรุงเทพมหานคร 10220

No. 44/543-544 Phahonyothin Road, Anusawari Sub-district, Bang Khen District, Bangkok, 10220 .

Tel: 02-0045555. Fax: 02-0012555. E-mail: center@chayo555.com

## **Information Form of the Person Nominated for Election as a Director**

1. Pe	rsor	nal Information							
	1.1	Name (Mr./Mrs./Ms.)			Surname				
	1.2	Address							
		Home/Office Phone Number							
		Email (if any):							
	1.3	Date of Birth:							
	1.4	Current Age: Years							
2. Sp	ous	e Information							
	2.1	Name (Mr./Mrs./Ms.)			Surname				
	2.2	2 Date of Birth:							
	2.3 Current Age: Years								
	2.4	Place of Employment			T				
		Place of Employment			Position				
3. Cl	nildr	en Information							
		Name - Surname Age Plac		ee of Employment / S	chool	Position			
4. Ec	luca	tion/Training History							
	Edi	ucational Institution / Training	ning Year of Graduation / Completion Degree / Major / Program			egree / Major / Program			
		Organization							



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5. Work Experience (Up to Present)

Company / Employer	Address	Position	Type of Business	Duration of
				Employment

. Securities Holdings in the Company as of the Date of Nomination (as of)						
	Number of Securities Held					
Securities Held By	Common Stock	Preferred Stock	Warrants (Specify)	Bonds (Specify)		
Securities from By	(Shares)	(Shares)	(Units)	(Units)		
1. Self						
2. Spouse						
3 Minor Children						
4. Others under Section 258						
(Please specify)						
		•	•	•		

7. History of Legal Proceedings Related to Violations of Securities and Exchange Laws or Capital Market Laws within the
Last 10 Years (Specify the Year of Incident, Allegations, and the Outcome of Legal Proceedings/Court Rulings)
8. Direct or Indirect Interests in the Company, Subsidiaries, Affiliates, or Related Companies (Please specify the nature of
activities and the type of interest, including the amount of benefits or losses involved)

9. Shareholding, Directorship, or Other Interests in Businesses with the Same Nature or that Compete with the Company, Subsidiaries, Affiliates, or Related Companies (Please specify the name of the partnership/company, the number of shares



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held, the percentage of registered capital, the type of bu	usiness, and the	nature of activities and	interests, including the
amount of benefits or losses involved)			
I hereby certify that the information contained in this form	n and the accom	npanying documents is tr	ue and accurate.
	Signature		Shareholder
	(		)
	Data:	Month	Vear

## **Notes**

Supporting Documents for the Information Form of the Person Nominated for Election as a Director

- 1. A certified true copy of the nominee's ID card or passport (for foreign nationals).
- 2. A certified true copy of the nominee's educational and training certificates.