

From to Submission of the Question Of Intermedical Care and Lab Hospital Public Company Limited

			Date	
Name Mr./Mrs./Miss				
Aged	years, Nationalit	y	. Address	
Telephone As a share	holder of Intermedical C	are and Lab Hospit	E-mailal Public Company Limite	ed, holding the
Wo	ould like to submit the qu	estion in advance	of the Annual General M	eeting of
Shareholders for the year As follows:				
1.				
2				
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3.				
	Signa	ture		Shareholder
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