

POWER OF ATTORNEY

No

Office of

District

Date

By this Power of Attorney, I, Mr./Mrs. husband/wife of the deceased, aged, Thai race, Thai nationality, residing at House No, Village No.,

Sub-district, District, Province, do hereby empowered

located at Company registered No owned by Mr. to be my representative to deal with any matters concerning the death of Mr./Miss/Mrs., my deceased husband/wife, who passed away on at hours, in Action of my representative which shall be deemed as my own ones are as follows:

- 1. consulting relevant parties about the death of Mr./Miss/Mrs.;
2. claiming any legitimate social welfare, compensation and other benefits; and then transferring it to his wife/her husband the beneficiary; and the name of account: Mr./Miss/Mrs. Account No. Bank, Branch;
3. taking responsibility for any other matters concerned;

This Power of Attorney shall come into force as of the date mentioned-above and shall terminate when all the matters concerned are accomplished.

Signed Grantor (Mr./Miss/Mrs.)
Signed Witness (Mr./Miss/Mrs.)
Signed Witness (Mr./Miss/Mrs.)

I hereby certify that the above signatures of the grantor and witnesses are true and genuine and the signatures were signed in my presence.

Signed

Office Seal Affixed

Certified correct translation

.....