

1. General information of proposed candidate

188, Spring Tower Building, Floor 12A, Unit 6-10, Phayathai Road, Thung Phayathai Subdistrict, Ratchathewi District, Bangkok Postai Code 10400 Tel. 0-2657-6222 Fax: 0-2657-6244, 0-2657-6245 188 อาคารสปริจ ทาวเวอร์ ชั้น 12A ฮูนิตที่ 6-10 ถนนพญาไท แขวงทุ้งพญาไท เขตราชเทวี กรุงเทพฯ 10400 Tel. 0-2657-6222 Fax: 0-2657-6244, 0-2657-6245

Form C: Information of the Nominated Candidate for Election as Director at the Annual General Meeting of Shareholders

(1)	Name-Surname (in Thai):					
	Maiden Name-Surname (if any):					
	Name-Surname (in English):					
	Maiden Name-Surname (if any):					
	Date of Birth		Age		Yea	
(2)	Nationality					
(3)	Marital Status	[] Single [] Married	d []Divorced []Ot	ther		
	Spouse's Name		Maiden Name-Su	ırname		
(4)	Numbers of Shareho	ers of Shareholding in AF:shares as of				
(5)	Spouse's Common s	hares:	shares as of			
(6)	Minor Children:					
	Name of Children	AgeYears	holds common share	es in AF	share(s	
	Name of Children	AgeYears	holds common share	es in AF	share(s	
	Name of Children	Age Years	holds common share	es in AF	share(s	
2. Curi	rent Address / Contact	t Address				
		Building:	Moo:Trok/Sc	oi:		
	_	Subdistrict:				
Pro	vince:	Postal Code:	Tel:			
		E-mail:				
2 Cur	cont Desition:					
3. Curi						
4. Edu	cation:					
	Institution	Degree a	Degree and Major Subject		Year of Graduation	



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5. Training / Seminar courses relevant to director position Course Organizer Year of Attendance ---------------6. Work Experiences: Past 5 years - Present Period Position Company/Organization I, Mr./Mrs./Miss(Surname:), hereby give my consent to be nominated and to provide the information contained in this document for consideration for election as a director of AIRA Factoring Public Company Limited. I certify that all details stated in this information form are true, correct, and complete, and that all supporting documents submitted herewith are genuine in all respects. I also consent to AIRA Factoring Public Company Limited to disclose such information or supporting documents as deemed necessary. Signature_____Nominated Candidate (_____) Date _____ Required documents certified by nominated candidates

Other supplementary documents (if any).....

Copy of an Identification Card / Passport (certified as a true copy)

Copy of house registration (certified as a true copy)

[] Copy of education certificate (certified as a true copy)

] Photo (1 or 2 inches)