Revenue Stamp
THB 30

POWER OF ATTORNEY

			At	
			Date	
By this lette	er, I/We			
AgeYears Ethr	nicity	lationality	son/daughter of Mr./Mrs	
Address No	MooKv	/aeng/Tambol	Khet/Amphoe	
Province		Telephone		
hereby auth	norize			
AgeYears Ethr	nicity	lationality	son/daughter of Mr./Mrs	
Address No	MooKv	vaeng/Tambol	Khet/Amphoe	
Province		Telephone		
to have the power o	f tobscribe f	or trust units of WHA I	Premium Growth Freehold and Lea	sehold
Real Estate Investm	ent Trust on m	y behalf. What has be	een done by the grantee will rema	in in full force and
effect as it has bee	en done by mys	elf/ourselves. As evic	dence, I hereby sign or stamp my	/ fingerprint in the
presence of the witr	nesses.			
		(Signed)		Grantor
		())
		(Signed)		Proxy
		())
		(Signed)		Witness
		())
		(Signed)		Witness
		()

Remarks: For the trust unitholders who subscribed via KASIKORNBANK Public Company Limited, the power of attorney is reserved exclusively for the trust unitholders that have previously undergone the Know Your Customer and Customer Due Diligence Process (KYC/CCD) with KASIKORNBANK Public Company Limited. If the trust unitholders do not wish to make the subscription for the trust units themselves, the trust unitholders may authorize another person to make the subscription and pay the subscription payment at the branch of KASIKORNBANK Public Company Limited on their behalf.

The trust unitholders who have not undergone the Know Your Customer and Customer Due Diligence Process (KYC/CCD) with KASIKORNBANK Public Company Limited shall personally make the subscription and pay the subscription payment at the branch of KASIKORNBANK Public Company Limited in accordance with criteria set forth by the Anti-Money Laundering Office and the Bank of Thailand.