



Acknowledgement Receipt

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This is to acknowledge that I have received the Notice of Annual Stockholders' Meeting" and I declare that [check appropriate blank]:

_____ I will attend the meeting via remote communication
_____ I cannot attend the meeting but will do so through a Proxy

_____ Signature over Printed Name of
Stockholder

_____ Email address
_____ Mobile number

Note: Please email this acknowledgement form to pdmcstockholders@gmail.com / stockholdersmeeting@pasigdoctors.ph before April 14, 2023.

Proxy Form

PROXY

The undersigned stockholder of Pasig Doctors Medical Center, Inc., hereby appoints _____ or in his/her absence, the Chairman of the meeting, as attorney and proxy, with power of substitution, to represent me and vote all shares owned by me or registered in my name in the books of the corporation at the Annual Stockholders' Meeting scheduled on _____ and any adjournment thereof, as fully to all intents and purposes as I might do if present and acting in person, hereby confirming and ratifying all acts which my above named proxy may lawfully do or cause to be done in the premises.

In witness whereof, I have signed this Proxy on this _____ day of _____ 2023 at _____.

_____ Printed Name of Stockholder
_____ Signature of Stockholder

Note: Please email to proxy form to pdmcstockholders@gmail.com / stockholdersmeeting@pasigdoctors.ph before April 14, 2023.