



Form of Declaration

Pursuant to the Notification of the Central Committee on the Price of Goods and Services

No. 3, B.E. 2563 (2020)

Regarding Declaration of Information, Display of Price, and Ration or Distribution of Hygienic Mask

Dated 4 February B.E. 2563 (2020)

Receipt No.
(Signed) Receiver (.....)
Rank
Date at hrs.

Name of Business Operator (Company/Partnership).....Address of Head Office No..... Alley/Lane.....Road.....
 Sub-district/Sub-area.....District/Area.....Province..... Postal Code..... Telephone.....Facsimile.....
 Type of Business Producer Importer Exporter..... Distributor..... Sole Distributor of.....
 To Apply for Permission to Sell in a Different Manner from Items as Already Declared To Sell at Higher Prices Than Those as Already Declared

Name of Goods	Trade Name (Brand)	Type/Model		Quantity per Unit		Packaging Unit		Distribution Price at Factory (Baht)		Wholesale Price (Baht)		Retail Price (Baht)	
		Medical Use	Non-Medical Use	Old	New	Old	New	Old	New	Old	New	Old	New

- Remark :
1. Total costs are the costs of a producer.
 2. The purchase price is the purchasing cost of an importer, an exporter and a distributor.

I certify that the particulars as hereby declared are true in all respects.

Signed Person who can sign to bind a juristic person

(.....)

Rank.....

(Affixing of a Juristic Person's Seal)

Date Month B.E.