

Power of Attorney

-Shareholder Identification Disclosures-

Attention: Clearstream Banking S.A. ("CBL")

This power of attorney ("Power of Attorney") will become effective from *[insert date]* _____
[Insert name of the company that is giving the Power of Attorney]

("the Company") whose registered office is at *[insert address details]*

Registered address: _____

City: _____ Post code: _____ Country: _____

hereby appoints *[Insert name of company]*, _____
as its attorney (the "Attorney") whose registered office is at *[insert address details]*:

Registered address: _____

City: _____ Post code: _____ Country: _____

with Swift BIC11 address: _____ DN: _____

for the following account numbers of the Company at CBL *[insert account details]*:

(the "Accounts")

- to receive, in the name and on behalf of the Company, via the Attorney's own SWIFT address as notified to CBL by the Company, any shareholder identification disclosure requests (seev.045) and shareholder identification disclosure request cancellation advices (seev.046).

The Company hereby agrees that it shall be fully liable to CBL for any and all obligations created on its behalf pursuant to the authority or purported authority of this Power of Attorney and undertakes to ratify whatever the Attorney causes to be done under the authority or purported authority of this Power of Attorney.

Each of the Company and the Attorney hereby agree that CBL shall not be held liable for any action or omission whatsoever, whether taken or omitted to be taken, erroneously or not, by the Company or the Attorney.

The Company and the Attorney hereby agree to hold harmless and not make any claim against CBL for any loss, claim, liability, damage, cost or any expense whatsoever due to the disclosure by CBL to the Attorney of all or any part of information related to the Accounts where such disclosure is for the sole purpose of the Attorney exercising its powers under this Power of Attorney.

This Power of Attorney is irrevocable and shall remain valid until notice of termination or amendment is received by CBL by registered letter. Any such termination or amendment shall take effect on the second business day in Luxembourg after receipt of the notice by CBL or such other later date specified in the notice accordingly.

This Power of Attorney is governed by and shall be construed in accordance with the laws of the Grand Duchy of Luxembourg.

On behalf of the Company,

Done in: _____

On: _____

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Title: _____

The Attorney hereby certifies that he accepts this Power of Attorney and all obligations and responsibilities provided in this Power of Attorney.

On behalf of the Attorney,

Done in: _____

On: _____

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Title: _____