

## Proxy to a person of your choice

Place

Date

| Number AGM ticket:  |                |        |               |                 |        |               |               |                   |                  |                  | Nam          | e / C | omp           | any   | ': _            |               |                |                 |        |              |                 |                |        |                        |                        |     |
|---|----------------|--------|---------------|-----------------|--------|---------------|---------------|-------------------|------------------|------------------|--------------|-------|---------------|---|-----------------|---------------|----------------|-----------------|--------|--------------|-----------------|----------------|--------|------------------------|------------------------|-----|
| hone number:*   |                |        |               |                 |        |               |               |                   |                  | First            | First name:  |       |               |   |                 |               |                |                 |        |              |                 |                |        |                        |                        |     |
|   |                |        |               |                 |        |               |               |                   |                  | E-mail address:* |              |       |               |   |                 |               |                |                 |        |              |                 |                |        |                        |                        |     |
| be retu   | ırned          | no l   | later         | thai            | n Ma   | ay 18         | 3, 202        | 22, 2             | 4.00             | houi             | s [m         | nidni | ght]          | (CES  | ST),            | (rece         | ipt) 1         | to:             |        |              |                 |                |        |                        |                        |     |
| NCAVIS AG<br>o Better Orange IR & HV AG<br>aidelweg 48<br>1241 Munich<br>ermany |                |        |               |                 |        |               |               |                   | E-mail:<br>Fax:  |                  |              |       |               | encavis@better-orange.de<br>+49 (0)89 889 690 655 |                 |               |                |                 |        |              |                 |                |        |                        |                        |     |
| <b>te:</b> Pro<br>data p  | roted          | tion   | and i         | the d           | lisclo | sure          | of p          | ersoi             | nal d            | ata.             |              |       |               |   |                 |               |                | itly in         | nform  | you          | ır pro          | oxy al         | oout   | the o                  | expla                  | ana |
| Firet   | nam            | ne of  | prox          | w *             |        |               |               |                   |                  |                  |              |       |               |   |                 |               |                |                 |        |              |                 |                |        |                        |                        |     |
| 1 1130  | IIaII          | 01     | prox          | .y              |        |               |               |                   |                  |                  |              |       |               |   |                 |               |                |                 |        |              |                 |                |        |                        |                        | 7   |
| Last  | nam            | ne or  | Com           | npany           | y of   | proxy         |               |                   | ] [              | ] [              |              |       |               |   |                 | ] [           | ] [            | ] [             |        |              | ] [             | J [            |        |                        | J [                    | ١   |
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| Stre  | et of          | prox   | xy **         |                 |        | J [           |               |                   | ] [              | ] [              |              | ] [   |               |   | J [             |               | J [            | J [             | ] [    | J L          |                 | No             | **     |                        |                        | ٦   |
|   |                |        |               |                 |        |               |               |                   |                  |                  |              |       |               |   |                 |               |                |                 |        |              |                 |                |        |                        |                        | ]   |
| Country ** ZIP Code ** Place  |                |        |               |                 | ce of  | resi          | denc          | e of <sub>l</sub> | orox             | y *              | ] [          | J [   | J L           | J L   | J               |               |                |                 |        |              |                 |                |        |                        |                        |     |
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| E-m   | ail of         | prox   | (y **         |                 |        | ] [           |               |                   | ]                | ] [              |              | 1     |               |   | 1               | 7             | 1              | ٦               | ] [    | ] [          | 7               | ٦              | ] [    | <b>-</b>               | ٦                      | ٦   |
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| * Man   | datory         | fields |               |                 |        |               |               |                   |                  |                  |              |       |               |   |                 |               |                |                 |        |              |                 |                |        |                        |                        |     |
| eprese<br>horizat   |                |        |               |                 |        |               |               |                   |                  |                  |              |       |               |   | VIS             | AG (          | on M           | lay 1           | 9, 20  | ا 22         | with 1          | the p          | owe    | r to o                 | deleg                  | jat |
| Recom   |                |        |               | •               | •      | ,             |               |                   |                  | •                |              | •     | •             |   | ttorn           | IAV OI        | · tha          | nroot           | f of a | utho         | rizat           | ion ir         | ndivi  | اديبا                  | 2006                   | 200 |
| he pas  | swo            | rd-pr  | otect         | ed ir           | ntern  | et se         | ervice        | will              | be c             | reate            | ed fo        | r the | prox          | y. Th   | nese            | will l        | oe se          | nt di           | rectly | y to t       | the p           | roxy           | if the | e ado                  | dress                  | s d |
| he pro<br>tected  | xy ar<br>inter | e co   | mple<br>servi | te. If<br>ce sh | the    | addr<br>e tra | ess c<br>nsmi | letail<br>tted    | ls of t<br>to th | the p<br>e ara   | roxy<br>ntor | are i | ncon<br>e po\ | nplet<br>ver d                                    | e, th<br>of att | e ind<br>orne | ividu<br>v for | ial ac<br>forwa | cess   | data<br>q to | a of t<br>the r | he pr<br>proxv | oxy    | to th                  | e pa                   | SS  |
|   |                | 1      |               |                 |        |               |               |                   |                  | J                |              | •     | 1.5.          | . •   |                 |               | , =-           |                 |        | J            | - r             | ,              |        |                        |                        |     |
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|   |                |        |               |                 |        |               |               |                   |                  |                  |              |       |               |   |                 |               |                |                 |        |              |                 |                |        |                        |                        |     |

Signature(s) or Person making the declaration (legible)