

Please send by FAX **0043/(0)504100 - 1490**



Officially recognized  
Creditor Protection Association  
according to Austrian insolvency law

# Letter Of Authorization

which entitles



Schleifmühlgasse 2, 1040 Wien

**to vote on our/my behalf in the insolvency proceedings mentioned below**

Competent court	
Court Reference Number	
<b>INFORMATION CONCERNING THE DEBTOR</b>	
Name	
Address	
Postal Code / Residence	
<b>YOUR REQUIRED VOTING</b>	
Hearing	
<input type="checkbox"/> At your own discretion <input type="checkbox"/> Pro <input type="checkbox"/> Pro, from ..... <input type="checkbox"/> Contra	

// The hereby granted letter of authorization is limited to exercise the voting right on your behalf.

// This letter of authorization does not include the clarification of contentious claims, the collection of claims (in form of quotas) and the accept of money amounts as well as their remittance to the creditors.

.....  
Place, Date

.....  
Authorized Signature / Official Company Stamp

You can find the complete terms and conditions under [www.akv.at](http://www.akv.at).