Power of Attorney from the Final Beneficial Owner to Clearstream Banking

I, the	undersigned, beneficial owner:
П	Mr/Mrs
	Place of birth:
	Date of birth:
	Tax Identification Number (TIN):
OR	I accordingly attach, for this purpose, a copy of my identity card.
	The company:
	Head office in the city of:
	Street address:
	Local Tax Identification Number (TIN):
	represented by:
	Mr/Mrs
	Place of birth:
	Date of birth:
	Tax Identification Number (TIN):
	I accordingly attach, for this purpose, a copy of my identity card as representative of the company.
do he	•
Class	APPOINT
	stream Banking S.A., registered office at 42 avenue John F. Kennedy, L-1855 Luxembourg, to represent:
and to preve	e the Agenzia delle Entrate, in pursuit of a reclaim of tax withheld in excess on income from Italian securities of fulfil any obligations with regard to requests for information, the filing of any additional documents and the ntion of prescription according to art. 2943 c.c. concerning such reimbursement;
and d	o hereby REQUEST
	ll payments of refunds to which we are entitled be made to Clearstream Banking in the account in the name nca IntesaSanpaolo IBAN IT48S0306912711999999999999999999999999999999999
	Power of Attorney is valid until an express revocation is communicated to both Clearstream Banking and the a Tax Authorities.
Yours	faithfully,
Authoi	rised Signature
Place	