

## STATEMENT OF AUTHORITY FOR TURQUOISE

We, (the Clearing Participant), hereby authorise the Trading Participant, as indicated under "full name and address of the Trading Participant", to conclude in our name trades in all securities in the Regulation Securities, which will be binding on us in accordance with the Clearing Participant Agreement and the Clearing Rules.

Clearing Participant Name	<input style="width: 100%;" type="text"/>		
Address	<input style="width: 100%;" type="text"/>		
City	<input style="width: 50%;" type="text"/>	Post Code	<input style="width: 40%;" type="text"/>
Country	<input style="width: 100%;" type="text"/>		

<input type="checkbox"/> all securities in all local home markets	or	<input type="checkbox"/> all securities for the following local home markets. <small>(please tick boxes for each individual market)</small>
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<input type="checkbox"/> Austria	<input type="checkbox"/> Finland	<input type="checkbox"/> IDR's	<input type="checkbox"/> Norway	<b>Spain</b> <small>(please complete special SoA)</small>
<input type="checkbox"/> Belgium	<input type="checkbox"/> France	<input type="checkbox"/> Italy	<input type="checkbox"/> Poland	<input type="checkbox"/> Switzerland
<input type="checkbox"/> Czech Republic	<input type="checkbox"/> Germany	<input type="checkbox"/> Clearstream International	<input type="checkbox"/> Portugal	<input type="checkbox"/> United Kingdom
<input type="checkbox"/> Denmark	<input type="checkbox"/> Hungary	<input type="checkbox"/> Netherlands	<input type="checkbox"/> Sweden	

These trades, when concluded, will be binding on us in accordance with the Clearing Participant Agreement and the Clearing Rules.

This authorisation comes into force on (date):	<input style="width: 60%;" type="text"/>
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This authorisation is limited to Trades concluded with the Trading BIC as mentioned under "BIC of Trading Participant". The authority granted by this Statement of Authority may be suspended or terminated by notice to the Trading Participant with immediate effect.

Notwithstanding the above, we hereby confirm to EuroCCP that they may rely on this Statement of Authority until its suspension or termination will have been confirmed by EuroCCP in accordance with chapter 5.2.2 of the Clearing Rule Book.

	Trading Participant Name <input style="width: 100%;" type="text"/>
Full name and address of the <u>Trading Participant</u> :	Address <input style="width: 100%;" type="text"/>
	City <input style="width: 50%;" type="text"/> Post Code <input style="width: 40%;" type="text"/>
	Country <input style="width: 100%;" type="text"/>

BIC of Trading Participant: <input style="width: 90%;" type="text"/>
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BIC of Clearing Participant: <input style="width: 90%;" type="text"/>
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Date and place of signing for receipt by EuroCCP:
Date: <input style="width: 90%;" type="text"/>
Place: <input style="width: 90%;" type="text"/>

Date and place of signing for receipt by EuroCCP:
Date: <input style="width: 90%;" type="text"/>
Place: <input style="width: 90%;" type="text"/>

Authorised signature (s) Clearing Participant
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Authorised signature(s) EuroCCP
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