

Minuta de Carta de Autorização

Instruções:

- **Company:** Designação da Sociedade
- **Po Box or Street:** Morada
- **City, Postal / ZIP Code and Country:** Código Postal complete e Localidade
- **a) Natural persons as authorized representatives:** Nome e e-mail dos representantes da Sociedade
- **City and Date:** Localidade e data de assinatura a apor carimbo da firma
- **First Signatory, Position:** Assinatura do primeiro representante
- **Second Signatory (if applicable), Position:** Assinatura do segundo representante
- **First Name, Last Name (please print):** Apelido, Nome (em letras maiúsculas)
- **Position as per Commercial Registe:** Cargo de acordo com o Registo Comercial, escolher entre:
 - o **Managing Director** (Director/Sócio Gerente)
 - o **by proxy (p.p.)** (por procuração)
 - o _____ (indicar outro cargo)

Herausbergemeinschaft
WERTPAPIER-MITTEILUNGEN
Keppler, Lehmann GmbH & Co. KG

(Company)

WM Datenservice
LEI-Helpdesk
Postfach 11 09 32
60044 Frankfurt am Main
Germany

(PO Box or Street)


(City, Postal / ZIP Code and Country)

Letter of Authorization for the Application of a Single Legal Entity Identifier

Dear Sir or Madam,

The following representative(s)¹ are hereby authorized to apply for and manage Legal Entity Identifiers on our behalf (above named entity). Furthermore, they are authorized to issue the declarations of intent necessary for these purposes and to take all measures required in this context.

a) Natural persons as authorized representatives:

Last Name, First Name	Email Address
	

Last Name, First Name	Email Address


Department/Corporate Division	Email Address

OR


b) Legal entity as authorized representative:

Name of Legal Entity	Email Address
Caixa Central de Crédito Agrícola Mútuo	dcompl.cccam@creditoagricola.pt

Department/Corporate Division	Email Address




City and Date



First Signatory, Position

Second Signatory (if applicable), Position



First Name, Last Name (please print)

First Name, Last Name (please print)


Position as per Commercial Register:
 Managing Director by proxy (p.p.)

Managing Director by proxy (p.p.)

¹Authorized representative(s) means either one or further natural or legal persons (service providers etc.). Please fill in the Letter of Authorization accordingly.