

Authority and Notification of Authority to Liberty Foundation for 3a Retirement Savings

Authority In my capacity as Principal, I hereby grant the below-designated Agent the authority to represent my interests in connection with my third pillar retirement savings vis à vis Liberty Foundation for 3a Retirement Savings, Steinbislin 19, 6430 Schwyz.

Notwithstanding the present Authority, both I, as Principal, and the below-designated person as Agent, are aware that for asset management purposes or for the transfer of my retirement savings capital (e.g. following relocation abroad, self-employment or other), I still first need to satisfy all the requirements as Principal.

Validity This Authority is valid until it is revoked.

Retirement Savings account

Account number

Agent

Name First name

Street, N° Postal code, place

Date of birth Phone

Agent's signature

Place, date Signature

Principal

Name First name

Street, N° Postal code, place

Date of birth Phone

Principal's signature

Place, date Signature

Attachment

- Copy of Agent's passport/ID