Credit advice - Proof of final distribution

We hereby certify that, upon making payment to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Full name of Beneficial Owner)*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*(Beneficial Owner’s full address for tax purposes)*

withholding tax was applied, as shown hereafter:

Description of security: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Security code *(ISIN or Common Code)*: |\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|

Quantity of securities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interest/dividend Payment Date: \_\_ / \_\_\_ / \_\_\_\_\_\_

Withholding tax applied:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Net amount of interest/dividends : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## ES-MIL’s intermediary

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** |  | |  |  |
| **Name and title of authorized signatory** |  | **Authorised signature** | |  |
| **Place** |  | | **Date** |  |

## ES-MIL

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of participant** | ES-MIL SPA | | **ES-MIL Account Number** | 2 1 8 9 1 |
| **Name and title of authorized signatory** |  | **Authorised signature** | |  |
| **Place** | Milan | | **Date** |  |