

MT 522 - STANDARD REFUND

Monte Titoli participant

MT account number	Contact name
.....
Address
.....
CAP	City
.....

Financial instrument

ISIN	Nominal	Qty
.....
Pay Date	Ex Date	
YYYYMMDD	YYYYMMDD	
.....	
MT special number ID		
.....		

Beneficial owner

Name	Surname
.....
Address
.....
Country	CAP & City
.....

Date,

Monte Titoli Participant signature

The participant declares that it has obtained from the beneficial owners all relevant waivers or consents related to secrecy and confidentiality of the data communicated to Monte Titoli herewith, according to the applicable data protection law.