

**AUTHORISATION FOR COMPENSATION REQUEST OF FAILED CONTRACTUAL POSITIONS**

To  
Cassa di Compensazione e Garanzia  
S.p.A.  
Via Tomacelli, 146  
00186 – Roma

By this form the underwritten..... as legally authorised  
representative/contractual representative  
for.....  
whose headquarter is in  
.....;

**PROVIDED**

that the company ..... is..... Clearing Member in  
the System as:

- ..... Clearing Member in the Share Section;
- ..... Clearing Member in the Equity Derivatives Section;
- ..... Clearing Member in the Bond Section;
- ..... Clearing Member in the Bond Section;

**AUTHORISES**

- The Settlement Agent for the Share Section .....
- The Settlement Agent for the Equity Derivatives Section.....
- The Settlement Agent for the Bond Section .....
- The Settlement Agent for the Bond Section .....

to the direct management, together with CC&G, of its own original Contractual Position on Non-Derivative Financial Instruments regarding the compensation requests as per article B.7.1.3, of the Instructions.

In the management of the compensation the above mentioned Settlement Agent  
..... commits itself to manage the original Contractual Position of the  
Clearing Member .....

according to the terms and the modalities foreseen in the Article B.7.1.3 of the Instructions, by sending to CC&G the requests of compensation.

(Place and date)

.....

*CLEARING MEMBER  
STAMP OF THE COMPANY  
SIGNATURE OF THE LEGAL /  
CONTRACTUAL REPRESENTATIVE*

.....

*For acceptance  
SETTLEMENT AGENT  
STAMP OF THE COMPANY  
SIGNATURE OF THE LEGAL/  
CONTRACTUAL REPRESENTATIVE*

.....