

Surname, name of the Client's representative			
Receipt of Digipass <small>(to be completed if the client's representative is changed and the new representative has been assigned an existing Digipass device)</small>	Digipass No. <input type="text"/> Receiving Date <input type="text"/>	Digipass No. <input type="text"/> Receiving Date <input type="text"/>	Digipass No. <input type="text"/> Receiving Date <input type="text"/>
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The Client hereby authorises the specified individuals, in accordance with the specified type of signatory rights, on behalf of the Client to open and close accounts for holding funds and securities, to freely, with no restrictions on volume, frequency or otherwise, manage funds and securities on the Client's account, including submission of orders to the Bank for transfer or withdrawal of funds, and other operations with funds and securities held by the Client. The authorisation gives the right to perform all the actions that the Client has the right to perform in accordance with the concluded agreement and General Terms of Business, including the right to determine users of the relevant Bank's service as set forth in the agreements.

This authorisation shall not apply to credit products.

This authorisation shall be binding for AS BlueOrange Bank, hereinafter referred to as the Bank, until the date specified or until the Bank receives revocation thereof.

3. I hereby confirm that all the information provided in this document is complete and correct.

(I undertake to immediately inform the Bank in writing about any changes in the above information provided)

4. I confirm acquaintance with the following definitions and clarifications:

* **United States person** – any person meeting at least one of the following criteria: 1) The individual has citizenship or a valid residence permit (Green Card) in the U.S.; 2) The individual's tax residence country is the U.S.; 3) The individual was born in the U.S.; 4) The legal entity has a phone number with a U.S. country code; 5) The legal entity is registered in the U.S.; 6) The residential or correspondence address of the individual is in the U.S. (including a P.O. Box in the U.S.); 7) A Power of Attorney has been issued to an individual/legal entity with an address in the U.S.

** **Politically exposed person (PEP)**: 1) a person currently or formerly employed in major public office, including a supreme official of state government, head of a state administrative unit (municipal government), head of government, minister (deputy minister or deputy to the deputy minister, if the relevant country has such a position), state secretary, or other high-level official in government or a state administrative unit (municipal government), parliament deputy or member of an equivalent legislative body, member of the management body (board) of a political party, judge (member of a court institution) in a constitutional court, supreme court or other court instance, member of the board or council of a supreme audit institution, member of the board or council of a central bank, ambassador, charge d'affaires, senior officer of the armed forces, member of the board or council of a state corporation, executive (director, deputy director) or member of the board of an international organisation, or any person holding an equivalent position in such an organisation, within the Republic of Latvia, a member state or third country.

2) a PEP family member: a) Spouse or equivalent. A person is considered an equivalent of a spouse only if the laws of the relevant state provide for such status; b) bērnsChild, child of a spouse or equivalent, or their spouse or equivalent; c) Parent, grandparent or grandchild; d) Brother or sister.

3) a close associate of a PEP – an individual known to have business or other close ties to one of the aforementioned, to be a stockholder or shareholder in the same corporation as one of the aforementioned, or an individual that is the sole owner of a legal entity known to have been established for the actual benefit of one of the aforementioned.

5. I am informed that the Bank processes personal data in accordance with applicable personal data protection laws and regulations of the Republic of Latvia and European Union, the General Terms of Business, and the Personal data processing policy. The purpose of data processing: preparation of the power of attorney. More information about the Personal data processing policy of the Bank is available here: <https://www.blueorangebank.com/en/information-on-processing-of-personal-data>.

6. Specimen signatures - authorisation filled in by

6.1. Surname, name of the Client's representative _____	6.2. Position _____
6.3. Signature _____	Date <input type="text"/>
6.4. Surname, name of the Client's representative _____	6.5. Position _____
6.6. Signature _____	Date <input type="text"/> L.S.

7. Representative of the Bank, who identifies the Client and Client's authorised individuals

7.1. Surname, name _____	7.2. Signature _____
	Date <input type="text"/> L.S.