

Power of attorney

I, the undersigned:

Date of birth:

Address:

Number of identity document / passport:

hereby

appoint

the Documentation Centre for Property Transfers of Cultural Assets of WW II Victims
(Centrum pro dokumentaci majetkových převodů kulturních statků obětí II. světové
války, o.p.s.)

Company identification number (IČO):

227 72 961

Contact address:

Čs. armády 34/828, 160 00 Praha 6, Czech Republic

as my agent

for purposes of processing and utilizing all of the provided information in connection with
the production of a research report.

This power of attorney remains in effect until the completion of the research report.

..... (place) , dated / 20..

authorizing party

I hereby accept this power of attorney.

Prague, dated / 20..

.....
authorized party (agent)

This power of attorney may be revoked.