

Industriens Barselsfond

POWER OF ATTORNEY FOR APPLICATION FOR REIMBURSEMENT

- BARSELSFONDEN.DK (The Maternity Fund of the Confederation of Danish Industry)

1. THE COMPANY PROVIDING THE POWER OF ATTORNEY

Name

CVR no.

Contact person - responsible for the Power of Attorney

E-mailadress of the contact person

2. THE COMPANY OBTAINING THE POWER OF ATTORNEY

Name

CVR no.

Contact person - holder of Power of Attorney

E-mailadress of the contact person

3. SIGNATURE OF COMPANY PROVIDING THE POWER OF ATTORNEY

Date and signature

The Power of Attorney must be sent to:

Industriens Barselsfond, Nørre Farimagsgade 3, 1364 Copenhagen K, Denmark