APPLICATION
for Distribution of the Quotient in the trust established by HPH Settlement as of 4 December 2002 (the „TRUST“)

I, the undersigned,

NID[*)]		*Date of birth (dd.mm.yy)*	
Name		*Surname*	

With permanent place of residence at

Street, incl. street no.			
Municipality incl. ZIP		*State Country*	

Hereinafter also called the “Beneficiary”, applies for Distribution of value of my Quotient in assets of the TRUST. I ask you to perform Distribution of the Quotient value to the bank account number:

Bank account number/IBAN: *Bank identification code (BIC):*

Variable symbol: *Specific symbol:* *SWIFT code:*

Full name and address of the bank branch:

Information on owner of the account stated in the contract concluded with respective banking institution *(it is not necessary to state whether these information are identical with data mentioned in the heading of the Application):*

Name of account:

Address of the account owner:

I ask to effect the Distribution *(check only one option):*

☐ in U.S. dollars ☐ in Czech crowns

I agree with the value of our Quotient be decreased for any expenditures/costs of sending this amount.

Within sense of the Act No 101/2000 Coll. of the Czech Republic, on the protection of personal data, as amended, I agree that any personal data stated by my will be processed by the Trustee of the TRUST or by subcontracted outsourced processing entity in the Czech Republic. In grant my consent for the purpose of preparation, implementation and settling of any liabilities ensuing from this Application. I note, that the TRUST administration as well as Distribution of the Quotient is ruled by the international law. I represent, that any personal data of the Beneficiary stated in the heading of the Application are identical with personal data maintained in the database of the Securities Center, Czech Republic, as at date of rise of the TRUST, or in the database of the Central Securities Depository, JSC., Czech Republic, at date of filling the Application. I declare that all information and facts provided by me are complete and true and correspond to the actual state. I declare that I am aware the fact that any untrue, false, incomplete or corrected information might result in non-acceptance of this Application as a valid one with all consequences resulting from such refusal, i.e. particularly that the Trustee of the TRUST has no liability to pay the Quotient value based on Application not recognized as a valid one by him. I declare that I filed only one valid Application for Distribution of the Quotient value in the TRUST. By signature of the Application for Distribution of funds I also certify that by moment of Distribution of the Quotient in compliance with this Application:

a) I relieve the Trustee of the TRUST from all liabilities which Trustee of the TRUST has towards the Beneficiary in respect to effecting the Distribution;
b) I waive exercising of all actions, claims or proceedings whatever nature suited based on or in connection with performed Distribution to the Beneficiary based on this Application
c) I release the Trustee of the TRUST from any liability of compensation for damages up to the amount of distributed Quotient in respect to any and all claims brought against the Trustee by any third person in connection with effecting the Distribution.

I represent that Shares of Harvard industrial holding, a.s., Company Number: 44269595, with registered office at Ohradní 65, Prague 4, Czech Republic, owned by me, are not subject to any court proceedings.

In..... on.....

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Officially certified signature of the Beneficiary

*) The spare identification number recorded in the database of the Central Securities Depository, JSC., in the Czech Republic [see the account statement in the CSD CR – item: identification number (identifikační číslo)]