Signatory Rights

Bank and Account No.

_____

Client (Mr. Mrs. Ms. Other Company)

_____
(Name, First Name / Company's Name)

_____
(Address / Domicile)

_____
(Zip-Code, City, Country)

The Undersigned hereby confers Power of Attorney upon:

(Name, First Name)	(Address)	(Nationality)	(Date of Birth)	SR*	(Signatory)
(Name, First Name)	(Address)	(Nationality)	(Date of Birth)	SR*	(Signatory)
(Name, First Name)	(Address)	(Nationality)	(Date of Birth)	SR*	(Signatory)

SR* Signatory Right: S = Single/Separate Signature Right
J = Joint Signature Right at two

The client herewith confirms that due to this Power of Attorney mentioned person(s) above may distribute of assets on the mentioned bank account above at their fully discretion. The person(s) above are explicitly entitled to transfer, to confirm the transfer, to close the account and to receive and to accept bank statements in the name and on the account of the client.

Due to this Power of Attorney, the person(s) mentioned above may act in their own or the benefit of a third party. The client herewith explicitly states that this Power of Attorney remains valid and can only be waived in writing. Additionally, the Power of Attorney remains valid after the death, bankruptcy or legal incapacity. The right to substitute is explicitly waived.

This Power of Attorney shall be governed and construed in accordance with the law of Switzerland. In the event of the client's place of living or domicile abroad, place of performance and place of bankruptcy proceedings shall be at T.N. Trading Network AG domicile in Zermatt, Switzerland. **Exclusive jurisdiction shall be with the competent courts of Sion (Canton of Wallis, Switzerland).**

_____
Place and Date:

_____
The Client's Signature: