

DECLARATION

- For the dividend payment by Appeninn Nyrt. for the financial year of 2016 -

Shareholder (hereinafter: „**Shareholder**”) data

Name: _____

Birth name: _____

Mother's (full) maiden name: _____

Date and place of birth: _____

Sex: _____

Citizenship: _____

Address: _____

Foreign-resident private individual's foreign address: _____

Tax number: _____

Company name: _____

Registered seat: _____

Bank's name: _____

Bank's registered seat: _____

Shareholder's IBAN: _____

Bank's SWIFT/BIC: _____

Securities account holder: _____

Securities account holder's registered seat: _____

Securities account holder's main account at KELER Ltd.: _____

Shareholder's client code at the securities account manager: _____

Shareholder's securities account number: _____

If a representative is acting on behalf of the Shareholder, the Shareholder(s) is/are:

- resident private individual owner(s)
- foreign-resident private individual owner(s)
- resident non-private entity(es)
- foreign-resident non-private entity(es)

(Please indicate your answer)

Undersigned Shareholder or representative acting on behalf of the shareholder hereby declare, I/We declare that I/We request that **Appeninn Vagyonkezelő Holding Nyilvánosan Működő Részvénytársaság** (registered seat: H-1022 Budapest, Bég street 3-5.; company registration number: 01-10-046538; tax number: 11683991-2-41, hereinafter: „**Company**”) pay the dividend for the financial year of 2016 according to the Company's announcement published on the Company's website in the following form:

monetary benefit (paid in the form of money)

non-monetary benefit (paid in the Company's ordinary share)

(Please indicate your answer)

I hereby acknowledge that the present declaration form shall be made available for the Company together with the certificate of ownership. If the form is erroneously or incompletely filled out or is made available to the Company after the provision of the certificate of ownership, the dividend shall only be paid in the form of money.

Date and place: _____

Signature

(in case of legal entity, authorized signature)

In front of us as witnesses:

Witness1:

Name: _____

Address: _____

Signature: _____

Witness2:

Name: _____

Address: _____

Signature: _____