

PASSPORTING REQUEST

1 Date and place of the passporting request

Place		Date	
-------	--	------	--

2 Relevant person submitting the passporting request

<input type="checkbox"/>	It is hereby stated that the persons submitting the passporting request are the same persons who have submitted the application for approval of the document for which the request to passport is being sought, as identified in point 3 below, and that there have been no changes in their identification data
--------------------------	--

If it is not possible to make the above declaration or if it requires to be updated, provide the following information:

RELEVANT PERSON (LEGAL or NATURAL) submitting the passporting request				
Relevant person	Name	Registered office/Residence	PEC certified email (where available) or EMAIL	LEI Code/Fiscal Code

NATURAL PERSON representing the legal person submitting the application for approval				
Name of the natural person	Title on the basis of which the natural person acts	Name of the legal person	PEC certified email (where available)	Contact details (email, tel.)

Notes (if any)	
----------------	--

3 Type of DOCUMENT for which the request to passport is being sought pursuant to Articles 25 and 26 of Regulation (EU) 2017/1129

Document for which passport is required	Date of the approval by Consob	Number of the notice of approval
<input type="checkbox"/> Prospectus		
<input type="checkbox"/> Registration Document (RD)		
<input type="checkbox"/> Universal Registration Document (URD)		
<input type="checkbox"/> Securities Note		
<input type="checkbox"/> Summary		
<input type="checkbox"/> Supplement		
<input type="checkbox"/> Amendments to the URD		

4 Host Member States for which passporting is required and translation of documents for passporting purposes:

Host Member State	Admission to trading	Offer to the public	Translation of documents into the language accepted by the competent authority of the Host Member State		
			Language (*)	Prospectus	Summary
Austria	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Belgium	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Bulgaria	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Croatia	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Cyprus	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Czech Republic	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Denmark	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Estonia	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Finland	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
France	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Germany	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Greece	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Hungary	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Iceland	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Ireland	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Latvia	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Liechtenstein	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Lithuania	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Luxembourg	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Malta	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
The Netherlands	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Norway	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Poland	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Portugal	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Romania	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Slovakia	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Slovenia	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Spain	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Sweden	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<i>(details in case Other is selected)</i>				<input type="checkbox"/>	<input type="checkbox"/>

(*) Indicate the language used for the translation

Notes (if any)	
-----------------------	--

5 DECLARATIONS

By signing this passporting request, the subscribers certify and confirm, under their own responsibility, the truthfulness of all statements made in this passporting request and in the annexes thereto as well as those set out below:

<input type="checkbox"/>	Declaration of responsibility for the translation (1): The translation of the document requested by the Host Member State into the accepted language, as indicated in the table in point 4, complies, in all its elements, with the document approved by Consob referred to in this passporting request and the translation is produced under the responsibility of the subscribers
<input type="checkbox"/>	Declaration concerning the omission of information (1): Any omission of information from the document, if any, has been approved by Consob
<input type="checkbox"/>	Declaration of validity of the document (1): To the best of their knowledge, no significant new factor, material mistake or material inaccuracy relating to the information included in the document referred to in this passporting request has arisen or has been noted between the date of the document's approval and the date of this passporting request

Notes (if any)	
----------------	--

6 Documents which constitute ANNEXES to the passporting request

<input type="checkbox"/>	Translations requested by the Host Member State (1)
<input type="checkbox"/>	Where the passporting request is not signed by digital signature, a copy of the identity card of the subscriber of the passporting request

Notes (if any)	
----------------	--

7 SIGNATURE of the passporting request and its annexes, as an integral part thereof, by the relevant person referred to in point 2 above

Relevant person	Name, surname and title of the subscriber	Signature of the passporting request (*)

(*) Digital signature: in PDF format with trusted certificate or qualified electronic signature according to Regulation (EU) 2014/910 (eIDAS Regulation) choosing the option "show signature in document"
 Signature: in a legible way

Notes (if any)	
----------------	--

(1) Where the passporting request is submitted with the application for approval of the prospectus/registration document/universal registration document/supplement, the information indicated therein must be transmitted after the approval of the related document, together with the translations requested by the Host Member State pursuant to Articles 25 and 26 of Regulation (EU) 2017/1129.