

Oesterreichische Kontrollbank Aktiengesellschaft
Notification Office under CMA
Strauchgasse 1-3
1010 Vienna

Registration

for the transmission of Fund Documents to the Notification Office pursuant to section 129 InvFA

Please fill in this form, sign it (corporate signature) and send it back to the Notification Office by post.

Changes must be made in writing.

1. Data Management Company / Customer

Company name

Registered Office

Postal code, city, street

Address

Postal code, city, street

Web address

Tax number

Commercial register no.

2. Billing

Please fill in the invoicing information.

Title, first/last name	
Department	
Invoice address Postal code, city, street	
Tel.	
Email	
Electronic submission of the invoice	yes no

3. Administrator

OeKB needs a central contact person who manages the customer's Users and user rights as Administrator pursuant to the Conditions of Use OeKB Service Platform and who transmits the Fund Documents. For managing the Users via the online OeKB User Administration system the Administrator needs a SMS Token for 2-factor-authentication, which will be submitted on request. User name and password for the administration will be submitted by email.

Title, first/last name	
Company *)	
Address Postal code, city, street	
Tel.	
Mobile (for SMS Token)	
Email	

*) Information required only if differing from Item 1, above.

If the Administrator is using an existing RSA- key fob issued by OeKB for 2-factor-authentication, please indicate the user name you log in with:

User name RSA Key fob

4. Further Users

Further Users may use the TDS according to Part A II. of the Terms of Use for Investment Companies except the issuance and revocation of user rights.

Title, first/last name

Company *)

Address *)

Tel.

Email

Title, first/last name

Company *)

Address *)

Tel.

Email

Title, first/last name

Company *)

Address *)

Tel.

Email

Title, first/last name

Company *)

Address *)

Tel.

Email

*) Information required only if differing from Item 1, above.

Title, first/last name

Company *)

Address *)

Tel.

Email

*) Information required only if differing from Item 1, above.

5. Registration Statement

By signing this registration, we confirm that we

- (i) have read and accepted the Terms of Use for Investment Companies as amended (the "Terms of Use"),
- (ii) have read and accepted the Conditions of Use OeKB Service Platform as amended,
- (iii) will only use the OeKB Service Platform according to these Conditions of Use,
- (iv) have authorised and empowered the Administrator/Users indicated above according to the Terms of Use,
- (v) have advised the Administrator/Users indicated above on their rights and obligations and
- (vi) are concluding as customer with Oesterreichische Kontrollbank AktiengesellschaftG, Am Hof 4, 1010 Vienna, an agreement in the form of the Conditions of Use OeKB Service Platform.

Place, date

Corporate signature

Name(s) of signatory/signatories (in print)