

**Revocation of power of attorney to a third person
Revocation of authorization and instructions to the company proxy**

Ticket number: _____ **Name / Company:** _____

Number of shares: _____ **First name:** _____

Telephone number:* _____ **E-mail address:*** _____

* voluntary information

Back to:

PVA TePla AG
c/o AAA HV Management GmbH Am
Stadion 18-24
51465 Bergisch Gladbach Germany

E-MailPVA2025@aaa-hv.de

Please mark with a clear cross:

I/We hereby revoke the power of attorney granted to the company's proxy for the Annual General Meeting on June 24, 2025.

I/We hereby revoke the power of attorney granted for the Annual General Meeting on June 24, 2025 **to**

Name or company: _____

First name: _____

Place of residence or registered office:

Loc
atio
n

Date

Signature(s) or other conclusion of the declaration
(e.g. name/company of the declarant(s))