

To
FinecoBank S.p.A.
Piazza Durante, 11
20131 Milan MI

VOTING AUTHORITY
FOR THE ORDINARY AND EXTRAORDINARY SHAREHOLDERS' MEETING
OF FINECOBANK S.P.A.¹
on April 11, 2017

The undersigned² _____
born in _____ on _____
or:
Company/trade name³ _____
Residence or business address: (town/city) _____
(street name) _____
Tax code/VAT no. _____

AUTHORISES

4

to represent him/her at the above Meeting, and to exercise the voting rights for _____
ordinary shares in FinecoBank S.p.A. deposited in the securities account⁵ no. _____ held
with _____ ABI _____ CAB _____ in accordance with the
communication⁶ no. _____ made by _____

The undersigned⁷ _____

DECLARES

that he/she holds the voting rights for the above shares, and that this Authority is signed in the following capacity
(mark with an X as appropriate):

- legal representative (*) - secured creditor - assignee - beneficial owner - manager -
 custodian - legal representative with power of delegation (*) - other (*) (specify)

The registered holder of the shares is⁸:

(*) Attach documents confirming ownership of these rights.

ID document⁹ _____ issued by _____
no. _____

Date _____ Signature _____

The delegate

- may be replaced by _____
 may appoint a deputy (art. 135-*novies* of the Legislative Decree no. 58/98).

may NOT be replaced.

Signature _____

Notes on completing and submitting this form

1. *The original form must be signed and given to the delegate. The delegate must send the original form to the Company, or deliver a copy (also in digital format), with certification of conformity and of the delegate's identity (art. 135-novies of the Legislative Decree no. 58/98). Voting authorities submitted in electronic format with e-signatures (art. 21, paragraph 2, Legislative Decree no. 82/05) may be sent by email, to the following address: ShareholdersDelegation@fineco.it.*
2. *Indicate the name and surname of the delegate (if an individual).*
3. *Indicate the business name of the delegate (if a legal entity).*
4. *Indicate the name, surname and address of the delegate, or the company/business name. Conferring proxy upon a representative in conflict of interest is permitted in accordance with the provisions set forth in art. 135-decies of the Legislative Decree no. 58/98.*
5. *Indicate the number of the securities account, the name of the depositary and the ABI and CAB codes.*
6. *Give details (if available on the date this authority is issued) of the communication made by the intermediary, and his/her name, if different from the securities account depositary.*
7. *Indicate the name, surname or company name and status of the person entitled to vote, **only if different from the registered shareholder.***
8. *Indicate the name, surname or business name of the registered shareholder.*
9. *Give details of a valid form of ID for the person signing this form.*