To be completed only if you wish to act by proxy!

POWER OF ATTORNEY

I, the undersigned: **Petitioner's** (principal's) name: Residential address: Date and Place of birth: place of birth: hereby authorise: Proxy's name: Residential address: Date and Place of birth: place of birth: to act on behalf of me and in my name with full powers in the proceedings started with a view to resolve the financial consumer dispute between myself and Name of financial service provider: address: at the Financial Arbitration Board. This power of attorney is valid until recalled and applies solely to the above financial dispute. Performed onmonth 20...year Principal's signature* Proxy's signature* Witnesses: Name: Name: Address: Address:

Mother's maiden name:

Signature:

Mother's maiden name:

Signature:

I also acknowledge that if the data subjects consider that the processing of data did not take place in compliance with the legal requirements, they have the option to initiate the proceedings of the Magyar Nemzeti Bank's internal data protection officer, or they can bring the matter before court. In addition, an investigation may be initiated by filing a report to the National Authority for Data Protection and Freedom of Information on the grounds that there was an infringement in practising the rights related to personal data management or there is imminent danger thereof.

^{*} I acknowledge that in the proceedings instituted on the basis of this petition, the Financial Arbitration Board will process my personal data stated in my petition to the extent and for the time necessary for conducting the proceedings, and it may disclose them to third parties in complying with statutory obligations.