## General power of attorney This form is a notification of an appointment

or change of representative.

Fields marked | must be filled in

Fields marked • fill in if relevant

Fill in with typed or capital letters.

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## onsagers

Change of r	epresentative	otification of change of representative.	
	IIIIS IS d II	offication of change of representative,	
Representa	itive		
	I/we hereby authori	ze:	
	Name: Onsagers AS		
	Address		
	Postal code	CuA	Country:
	i Ostai cotto	City	Country
		Organisation number:	Customer ID: 1075
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