(place and date)

## Power-of-Attorney granted on behalf of a legal person or organizational unit that is not a legal person but has legal capacity granted by the act to participate in the Extraordinary Shareholder Meeting of **Powszechny Zakład Ubezpieczeń Spółka Akcyjna** convened for 27 February 2018

I/We, the undersigned	(first name and surname),	
holding	(specify type and number of the identity document),	
residing at	(place of residence and address)	
e-mail	; phone no;	
holding	(specify type and number of the identity document),	
residing at	(place of residence and address)	
e-mail	, phone no	
authorized to act on behalf of Shareholder)	(business name/ name of the	
with its registered office in,	(address)	
entered in	(register, entry no.)	
represent that	(business name/ name of the Shareholder)	
Spółka Akcyjna with its registered of	ffice in Warsaw ("PZU SA"), authorized under (say:	
shares of PZU SA ("Shareholder")		
and I/We hereby authorize:		
Mr./Ms. surname),	(first name and	
holding	(specify type and number of the identity document)	
residing at	(place of residence and address)	
e-mail	, phone no	
or	. (business name/name of the entity) with is registered office in	

(address)	entered in	(register, entry no.)
e-mail	, phone no	**

to represent the Shareholder at the Extraordinary Shareholder Meeting of PZU SA convened for 27 February 2018, at 11:00 a.m., in the Company's registered office in Warsaw at al. Jana Pawła II 24, 00-133 Warsaw, and in particular to participate and take the floor during the Extraordinary Shareholder Meeting, to sign the attendance list and to vote on my behalf under ......) shares in PZU SA according to the instructions on how to vote attached to this power-of-attorney/at the proxy's discretion.\*\*\* The aforementioned proxy is authorized to represent the Shareholder at the Extraordinary Shareholder Meeting of PZU SA also if the Extraordinary Shareholder Meeting of PZU SA is adjourned.

The proxy is authorized / is not authorized\*\*\* to grant further powers-of-attorney.

.....

(signature)

\* fill out if the power-of-attorney is given to a natural person.

\*\* fill out if the power-of-attorney is given to a person, which is not a natural person.

\*\*\* delete as applicable.