

_____, date _____

Trakcja PRKil S.A.
ul. Złota 59, 18th floor
00-120 Warsaw, Poland

**POWER OF ATTORNEY FOR PARTICIPATION IN THE EXTRAORDINARY GENERAL
MEETING OF SHAREHOLDERS OF PRKil S.A. BASED IN WARSAW CONVENED
FOR DECEMBER 11, 2019**

AUTHORISING SHAREHOLDER

1. Forename, surname or business name of the Shareholder: _____
2. Number of shares held by the Shareholder: _____
3. Percentage of shares held by the Shareholder in Trakcja PRKil S.A.'s share capital: _____
4. Number of voting rights on shares held by the Shareholder at Trakcja PRKil S.A.'s General Meeting of Shareholders: _____
5. Shares registered in a securities account in: _____
6. Represented ¹ _____
7. Address (headquarters) of the Shareholder: _____
8. E-mail address of the Shareholder: _____

I (we), the undersigned, hereby authorize:

Mr./Ms (*forename and surname*), holder of
..... (*specify series and number of ID document*)
Phone number....., e-mail address

or

¹For natural persons fill in: "personally", for other entities please enter persons who represent the entity and attach to the power of attorney a certified copy of the entry into a relevant register.

.....(*business name of the entity*)
based in, address,
entered into..... as number.....
Phone number....., e-mail address.....

to represent the Shareholder at the Extraordinary General Meeting of Shareholders convened for December 11, 2019, to be held at 9:00 a.m., in Warsaw, Etiuda Room of the Mercure Hotel, (Złota Street 48/54, 00-120 Warszawa), including in particular to take part and take the floor during the Extraordinary General Meeting of Shareholders, to sign the attendance list and to vote on my behalf, on.....

(say:) shares/all shares* in accordance with the instructions on how to vote / according to proxy's discretion.*

The above mentioned proxy is authorized to represent.....
(*forename and surname / business name of the Shareholder*) at the Extraordinary General Meeting also during any adjournment in the proceedings of the Extraordinary General Meeting.

The proxy is authorized / not authorized * to grant further powers of attorney.
(*forename(s) and surname(s) and job title(s)*)

NOTE:

This form, once completed in accordance with the instructions contained therein, together with attachments in the original or copies certified by a notary, may be submitted to the Company in writing or in electronic form. If the form is to be submitted in electronic form, any attachments contained in this form, together with a properly completed and signed form should be sent to the Company, in PDF format, to the following email address: walne@grupatrakcja.com. The Company reserves the right to verify the validity of submission of the motion electronically.

*delete as appropriate