Power of attorney

for submission of an application for funding in the context of VIENNA CONVENTION FUND 2025+

Company/o	rganization				
Company name			Legal form		
Contact per	son				
Title	First name	First name		Last name	
Address	-				
Address (str	eet name and door number)	Zip code	Town/city	Country	
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	nentioned Grantor hereby au	ıthorizes			
Company name			Legal form		
	31110		Logarionii		
0					
Title First name			Last name		
			2001.10.110		
Address					
	eet name and door number)	Zip code	Town/city	Country	
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to apply as	authorized company for f	unding from			
Orantaria al				d company represents the	
Grantor in ai	I matters related to the subn	nssion and p	rocessing or the a	аррисацоп.	
		Grantor			
Town/city, date		Name of company/organization in block capitals			
Name of authorized paragraph		Logally binding signature(s) of sutherized payon(s)/sutherized			
Name of authorized person(s) in block capitals		Legally binding signature(s) of authorized person(s)/authorized signature (with company stamp, if available)			