



IRREVOCABLE CONFIRMED ORDER



NUMBER:

BINDING ORDER OF GIGCZ1 BONDS

An inseparable attachment to the order is: CLIENT INFORMATION SHEET

CLIENT INFORMATION SHEET

Corporate Information

| | |
|-------------------------------------|----------------------|
| Full Name of Corporation | <input type="text"/> |
| Date of Incorporation | <input type="text"/> |
| Incorporated in (Country) | <input type="text"/> |
| Registration Number | <input type="text"/> |
| Board of Directors (Names & Titles) | <input type="text"/> |

Location of Address: Registered Address (Corporation)

| | |
|--------------------------|----------------------|
| Full Name of Corporation | <input type="text"/> |
| Street Address | <input type="text"/> |
| City | <input type="text"/> |
| State | <input type="text"/> |
| Country | <input type="text"/> |
| Postal Code | <input type="text"/> |

Location of Address: Mailing Address (Corporation)

| | |
|--------------------------|----------------------|
| Full Name of Corporation | <input type="text"/> |
| Street Address | <input type="text"/> |
| City | <input type="text"/> |
| State | <input type="text"/> |
| Country | <input type="text"/> |
| Postal Code | <input type="text"/> |

Contact Information (Corporation)

| | |
|--------------------------|----------------------|
| Telephone Number | <input type="text"/> |
| Fax Number | <input type="text"/> |
| Mobile Number | <input type="text"/> |
| Email Address | <input type="text"/> |
| Skype | <input type="text"/> |
| Website: (if applicable) | <input type="text"/> |

Languages / Translator

| | |
|-----------------------------------|----------------------|
| Does the Signatory speak English? | <input type="text"/> |
| Languages | <input type="text"/> |
| If No, Name of Translator English | <input type="text"/> |
| Tel Number | <input type="text"/> |
| Email Address | <input type="text"/> |
| Skype | <input type="text"/> |

Legal Advisor

| | |
|------------------|----|
| Full Name | pÿ |
| Company | pÿ |
| Address | pÿ |
| City | pÿ |
| State | pÿ |
| Country | pÿ |
| Postal Code | pÿ |
| Telephone Number | pÿ |
| Fax Number | pÿ |
| Email Address | pÿ |

Legal Client Account

| | |
|-------------------|----|
| Bank Name | pÿ |
| Street Address | pÿ |
| City | pÿ |
| State | pÿ |
| Country | pÿ |
| Postal Code | pÿ |
| Account Name | pÿ |
| Account Number | pÿ |
| Sort Code ABA No | pÿ |
| SWIFT Code | pÿ |
| Bank Officer Name | pÿ |
| Telephone Number | pÿ |
| Fax Number | pÿ |

Personal Information of Officer(s) of Corporation / Passport Information

Director #1

| | |
|------------------------|----|
| First Name | pÿ |
| Middle Name | pÿ |
| Last Name | pÿ |
| Gender | pÿ |
| Date of Birth | pÿ |
| Social Security Number | pÿ |
| Country of Citizenship | pÿ |
| Languages | pÿ |
| Passport Number | pÿ |
| Date of Issue | pÿ |
| Date of Expiry | pÿ |
| Issuing Authority | pÿ |

Home/Legal Residence (Officer(s) of Corporation) (Please attach copy of utility bill)

| | |
|----------------------|----|
| Full Name of Officer | pÿ |
| Street Address | pÿ |

| | |
|-------------|----|
| City | př |
| State | př |
| Country | př |
| Postal Code | př |

A binding order

| Bond issue | Face value Euro currency | Number of pieces | Total price | Bond delivery I'll pick you up in person <input type="checkbox"/> Through a courier <input type="checkbox"/> |
|------------|-----------------------------|---------------------|-------------|--|
| GIGCZ1 | 10.000,00 | př | př | |

Note: If you order only GIGCZ1 issues, it is necessary to order at least 10 pcs according to the issue conditions

I, as the underwriter of the bond issued by the GIGCZ1 issue, declare that I have read in detail the issue conditions listed on the issuer's website gigcz.com, I fully understand the conditions and I am executing this binding order. I swear that the above information is accurate and true as of the following date:

By sending the order and its inseparable attachment, I confirm my interest in purchasing the bond (s).

For and on behalf of Name : př

Authorized Signature

Print Name and Title př

Date př

Závazná objednávka

| Dluhopis emise | Nominální hodnota Měna Euro | Počet kusů | Cena celkem | Doručení Vyzvednu osobně <input type="checkbox"/> Prostřednictvím kurýra <input type="checkbox"/> |
|----------------|--------------------------------|------------|-------------|---|
| GIGCZ1 | 10.000,00 | př | př | |

Note: Pokud objednávejte pouze Emisy GIGCZ1 je nutné objednávat podle emisních podmínek minimálně 10Ks

Já, jako upisovatel dluhopisu vydané emise GIGCZ1, prohlašuji, že jsem se detailně seznámil s emisními podmínkami uvedenými na webové stránce emitenta gigcz.com , plně jsem podmínkám porozuměl a provádím tuto závaznou objednávku. Přísahám, že výše uvedené informace jsou k tomuto dále uvedenému datu přesné a pravdivé:

Odesláním objednávky a její neodělitelné přílohy potvrzují závazně svůj zájem dluhopis (y) zakoupit.

Za a jménem společnosti: př

Podpis oprávněné osoby.....

Napsat jméno a funkci: př

Datum př