

Authorization for

Person or legal entity	Company registration number (if relevant)
Address	
Postal address	

To act on my/our behalf concerning everything related to patents/patent applications/PCT applications in Sweden. This includes the right to receive documents in related matters.

Authorization allows the opportunity to put others in the agents place (full power of substitution).

Issued by

Person or legal entity	Company registration number (if relevant)
Address	
Postal address	

Signature by authorized signatory or applicant/proprietor

Place and date
Signature
Clarification of signature