FORM F3

CONSENT TO OBTAIN DATA FOR THE VERIFICATION OF THE INFORMATION PROVIDED IN THE APPLICATION FILE

| SECTION 1 | | | | | |
|------------------|--|-----------|--|--|--|
| Name and Surname | | | | | |
| Date | | Signature | | | |

| SECTION 2 | | | | | |
|--|-----|----|--|--|--|
| I, the undersigned, as a participant in the ongoing selection and nomination procedure, knowing that false statements are punished in accordance with Article 326 of Law No. 286/2009 on Criminal Code and understanding that any omission or inaccuracy in the presentation of information constitutes false statements and is punished according to the law, I hereby declare, on my own responsibility, that: | | | | | |
| (please tick only the option that corresponds to your choice) | | | | | |
| | YES | NO | | | |
| I give my consent to carry out the procedure of obtaining data from employers, educational institutions, state administration institutions and contact persons, for the purpose of verifying the information made available by me to the Selection and Nomination Commission in the selection and nomination procedure of members of SNGN ROMGAZ S.A. Board of Directors | | | | | |