



### POWER OF ATTORNEY

The undersigned (name employee): \_\_\_\_\_

with BSN (Dutch fiscal number): \_\_\_\_\_

,herewith grants power of attorney to Grant Thornton Expatriate Services B.V., to file, on his/her behalf, a request for the application of the 30% ruling.

Moreover, the undersigned declares to have filled out the 30 % tax ruling-questionnaire truthfully.

Place: \_\_\_\_\_

Date (DD-MM-YYYY): \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_