

Fleminggatan 18, 112 26 Stockholm, Sweden +46 (0)8 5368 500

Power of Attorney – Sweden

I hereby authorize the following persons to act as an agent on my behalf for the below-mentioned purposes and concerning the below-mentioned authorities.

I hereby authorize the below-mentioned persons to act as an agent on my behalf in relation to the Swedish Tax Agency ("Skatteverket") for the purpose of:

- filing preliminary tax returns, (preliminar inkomstdeklaration 1)
- applying for special income tax for nonresidents,
 - (särskild inkomstskatt för utomlands bosatta, SINK)
- applying for preliminary a-tax, (anmälan om preliminär A-skatt)
- retrieving tax income statement reports, (sammanställning inkomstuppgifter/individuppgifter),
- responding to inquiries and proposals concerning individual tax return, (förfrågan och överväganden/förslag till beslut avseende inkomstdeklaration 1),
- initiating re-assessments of individual tax return
 - (begäran om omprövning av inkomstdeklaration 1)

1. Shawn Coutinho

Capgemini Sverige AB shawn.coutinho@capgemini.com +46 76 254 30 69

2. Ratakonda, Sivakumar

Capgemini Sverige AB sivakumar.ratakonda@capgemini.com +46 73 732 74 05

3. Hyleen, Karl

Capgemini Sverige AB <u>karl.hyleen@capgemini.com</u> +46 73 436 96 41 I hereby authorize the below-mentioned persons to act as an agent on my behalf concerning my work permit application(s) with the Swedish Migration Agency ("Migrationsverket"):

1. Shawn Coutinho

Capgemini Sverige AB mobilitysweden.se@capgemini.com +46 76 254 30 69

2. Nordström, Monica

Capgemini Sverige AB <u>mobilitysweden.se@capgemini.com</u> +46 70 669 49 02

3. Hyleen, Karl

Capgemini Sverige AB
mobilitysweden.se@capgemini.com
+46 73 436 96 41

4. Yousef, Rama

Capgemini Sverige AB mobilitysweden.se@capgemini.com +46 72 033 33 00

5. Ghunoom, Ahmed

Capgemini Sverige AB mobilitysweden.se@capgemini.com +46 76 576 57 02

6. Vaz, Nerrisa

Capgemini Sverige AB mobilitysweden.se@capgemini.com + 46 73 180 01 50

The Agent's address

Capgemini Sverige AB, Fleminggatan 18, 112 26, Stockholm

Information about yourself (person granting this Power of Attorney)

Surname	First name		Date of Birth	
Current Address				
District/City		Postal Code		
Place and Date				
Signature (This Power of Attorney has not been recalled as per the date of signature.)				



Surname

The below information is for family members of the main applicant (person granting this Power of Attorney) to apply for a residence- and work permit for Sweden.

Information about the main applicant's spouse/cohabitant who is granting this Power of Attorney to the Agents mentioned above (the main applicant's employer)

First name

Citizenship	Date of Birth		
Place and Date			
Signature (This Power of Attorney has not been re	called as per the date of signature.)		
Information about the main applicant's children who are granting this Power of Attorney to the Agents mentioned above (the main applicant's employer)			
Surname	First name		
Citizenship	Date of Birth		
Surname	First name		
Citizenship	Date of Birth		
Surname	First name		
Citizenship	Date of Birth		