	(place)	,(date)
Management Board of PKN ORLEN S.A. ul. Chemików 7 09-411 Płock, Poland		
OF GRANT	NOTIFICATION FING POWER OF PROXY IN ELE FOR NATURAL PERSON	
Notifying Shareholder: (Please provide data clearly identifying	the Shareholder, as well as contact detail	s, i.e. email address and phone number)
(first name and surname)		
(address, post code, city/town, country	)	
(contact details: email, phone No.)		
(number of	,	shares recorded in the
securities account at carrying the right to of PKN ORLEN S.A.	(name of the institution votes at the Genera (number of voting rights)	maintaining the account)
This is to inform you that on		a power of proxy was granted
in electronic form to	(first name and surname)	holding
(document name	No	(document number)
to represent me as a Sharehold	der and owner of the PKN ORLEN	shares
at the General Meeting of the C	Company convened for	
by participating in the General I	Meeting and exercising voting righ	(date of the General Meeting) its from all the shares on my behalf.
□* the notification is equiv	alent to granting a power of proxy	to the individual named above
□* the power of proxy in th	(Shareholder's signature) ne PDF format is attached to this r	notification

<sup>\*1</sup> If the Shareholder holds shares registered in multiple securities accounts and appoints separate proxies to vote the shares in each of the accounts, the number of shares in a given account must also be provided.

<sup>\*2</sup> Fill in if the Shareholder holds shares registered in multiple securities accounts and appoints separate proxies to vote the shares in each of the accounts.

 $<sup>\</sup>square^{\,\ast}$  Please tick the appropriate box