

Power of Attorney for communities of heirs

GVL agreement number: _____

GVL-ID: _____

As a joint heir in the matter concerning the deceased's estate relating to the above GVL agreement number

Family name, first name: _____

Address, postcode, town: _____

I herewith authorise

Family name, first name: _____

Address, postcode, town: _____

Telephone number: _____ E-Mail: _____

to represent me vis-a-vis the Gesellschaft zur Verwertung von Leistungsschutzrechten mbH (GVL) in the following matters (please tick as appropriate):

- to receive and reply to correspondence as well as
to communicate changes to master data (e.g. territorial assignment of rights, address changes,
changes to bank details) as well as
to enter and amend any contributions by accessing the online portal ARTSYS.GVL as well as
to produce evidence for artistic contributions.

- to receive GVL remuneration

BIC / SWIFT: _____

IBAN: _____

Account holder: _____

This Power of Attorney shall be valid until cancelled in writing.

Date: _____

Signature: _____