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Initials DP

**REQUIRED: Client Information:**

Company Legal Name: MDC (SG) PTE LTD

State of Incorporation: \_\_\_\_\_

Company Mailing Address (no P.O. Boxes) - must match address given on Page 1:

Singapore 078581, Hong Leong Bld,  
Raffles Quay 238-02

**REQUIRED: Client Primary Contact and Authorized Sender**

First Name: DMITRIJ Last Name: DORONIN

Job Title: CEO Phone Number: 15821406172

Email Address (must match the URL of company's domain name):  
dd@mdl.jie Cell Phone: \_\_\_\_\_

Initials: DP (REQUIRED)

**Additional Authorized Senders**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
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**REQUIRED: The Client hereby authorizes these parties to issue press releases for distribution on its behalf.**

Initials DD

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Primary Authorized Sender Signature: \_\_\_\_\_

Print Name: DANIELS PROVEN

Position/Title: CEO

Date: 08/02/2008

Initials: DD (REQUIRED)