

Trade name / name / surname and first name:							
Registered office / employer's address, the Postal Code:	includii	ng					
Identification number (IČ):					Employer's	telephone number (fixed line):	
(Hereinafter the "Employer")							
1. The Employer hereby confirms that							
Loan applicant					Gua	arantor	
Physical entity							
Surname, first name, title:							
Address (permanent residence, including the Postal Code):							
Personal identification number (date of birth if the personal identification number is not available):							
Type, number, and expiration of an ID care as the issuing authority / country:	d as we	ell					
(Hereinafter the "Employee")							
Is employed by the Employer as						1) since	2).
2. The Employee's employment has been ag	_	_				e, i.e. specifically until /	$^{\prime}$ riod of time $^{\scriptscriptstyle 3)}$.
3. The Employee's monthly income amou	nts to					_	
Average net monthly income for the last 12 months:							
Gross annual income excluding insurance premium for the last tax period:							CZK
Only complete this section if the employment lasts less than 12 months and state the employment duration in months (min. 3 months):							
Average net monthly income for the last					mo	onths:	СZК
4. The following deductions are / are not³ exercised in respect of the Employee's income:							
Deductions on the basis of an execution of judgment:							СZК
Payments / instalments:							СZК
Other:							СZК
 The Employer hereby declares that no neg and that the Employee is not within a pro The Employer acknowledges the right of the provided herein and, if need be, to reques 	bation _I the Kon	period nerční	banka	a, a.s. (hereinafter al	so the "Bank") to verify (namely by tele	ephone) any information
7 . This confirmation shall be valid for the pe	riod of	30 day	ys froi	m the o	late of issuan	ice.	
In							
Place and date of issuance		Issu	ed by	/ telep	hone	Employer's stamp and sig	nature
I hereby agree with the right of the Bank to verify (na	melv bv	telepho	ne) an	v inform	ation provided h	herein with my Employer and, if need be, to red	quest the Employer to reissue

I hereby agree with the right of the Bank to verify (namely by telephone) any information provided herein with my Employer and, if need be, to request the Employer to reissue the Working income confirmation. For this purpose, the Bank is entitled to provide the given Employer with any information relating to the loan / guarantee in question.

I am aware of the fact that the Bank will process my personal data to the extent of such data I provided to the Bank in connection with this request/application for the purpose of contractual relation negotiation. I hereby acknowledge that the provision of personal data is voluntary and that, upon my request and under the terms and conditions stipulated by Act no. 101/2000 Coll., on the Personal Data Protection (hereinafter the "Act"), I am entitled to information concerning the personal data processed about me and I am entitled to other rights, namely the right to address the Office for Personal Data Protection – in case of the violation of the Bank's obligations – with a request for ensuring corrective actions and other measures in compliance with the provisions of § 21 of the Act.

¹⁾ Complete the working position. ²⁾ Complete a day, month, and year. ³⁾ Select as appropriate.