Proxy Form*	
To: Saipem spa via Martiri di Cefalonia, 67 20097 San Donato Milanese (Milan)	
I, the undersigned Last name First name born in/at on , residing in (city) at (address) Italian Fiscal Code No Issued by Expiry date	
In my capacity as:  □ individual shareholder □ legal representative of (name of agency/company)	
Data to be provided at the discretion of the delegating party:	
Notice no	
DO DELEGATE	
Mr/Mrs  Born in/at	
RECORDED IN SECURITIES ACCOUNT NO	
Residing in	
I, the undersigned (surname and name of the signer only if different from that of the owner of the shares	;)
Date Signature of the delegating party	
IN THE EVENT THAT THIS FORM IS A COPY OF THE ORIGINAL: Pursuant to and for the purposes of art. 135-novies of Legislative Decree 58 of February 24, 1998, the Representative certifies the identity of the delegating party and the compliance of the copy with the original.	ıe
Signature of the Representative	
*NB: The validity of the proxy form is subject to the authorised intermediary having sent a notice to the Companupon request of the party entitled to participate and to exercise voting rights.	у,