

REVOCATION of POWER OF ATTORNEY

The issuer of the power of the power of attorney

Name / company, address and date of birth / register-number of the issuer

with the deposit account no

Deposit account number

at the account maintaining credit institution

Name, address or BIC

as shareholder of Vienna Insurance Group Wiener Städtische Versicherung AG hereby
revokes power of attorney to

Name / company, address and date of birth / register-number of the representative

for representation at the

19th ordinary Annual General Meeting of
Vienna Insurance Group Wiener Städtische Versicherung AG
on Tuesday, 29 June 2010, at 11.00 am,
at the Wiener Stadthalle, 1150 Vienna, Hütteldorfer Straße 2F, Hall F.

Please **send** this revocation **by** 28 June 2010 (15:00 hours CEST)

- via **fax** to +43 (0) 1 89 00 500-60
- or by **mail** or messenger (effective date of arrival) to:

Vienna Insurance Group
Wiener Städtische Versicherung AG
Attn. Ms. Mag. Helene Kanta
Schottenring 30
1010 Vienna
Austria

The presentation of the revocation on the date of the General Meeting at the registration counter at the meeting place at the latest is also allowed.

Place, Date, Signature / Company