



Annex A
CERTIFICATE OF FISCAL RESIDENCE

Issued by Zafat Assessing Office

Address

Weizman Street 20

Phone: +972- 04/6929777

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I hereby certify with regard to the following taxpayer as follows -

Taxpayer's Details

Individual Name: [REDACTED] Identification Number: [REDACTED]
(Hereinafter "The taxpayer")

For Tax Year/s: 2019

- a. The taxpayer is a resident of Israel and is liable to tax in Israel as such.
- The taxpayer is a resident of Israel within the meaning of the Double Taxation Convention between Israel and Spain.
- b. The taxpayer regularly reports his / its income as required, the most recent income tax return filed for the year 2017.

[Signature]
Zafat Assessing Office
Director or Deputy

10.7.2019

Date of Signature



Please direct all further correspondence, if needed, to