

## **Power of Attorney**

To: Phoenix Testlab GmbH

Name or model type of the Specified Radio Equipment:

Applicant's company name:

Marquardt GmbH

Applicant's company address:

Schloss-Str. 16

D-78604 Rietheim-Weilheim

Applicant's name:

i.V. Thomas Schwarz Dipl.Ing. (FH)

Date and Applicant's Signature:

2009/12/09

Job Title and Department:

**Executive Manager** 

Central Development Automotive

It is necessary, that the person registered with FCC, signs this form.

I hereby authorize the following person as a representative and all rights regarding the application to obtain Type Certification for the Specified Radio Equipment (mentioned above) are delegated.

Attorney's Company name:

m. dudde hochfrequenz-technik

Attorney's Company address:

Rottland 5 a

51429 Bergisch Gladbach

Attorney's Name:

Mr. Andreas Morsbach Mrs. Anja Hittig-Rademacher

Date and Attorney's Signature:

2010-03-16 A Montach

Job Title and Department:

homologation department