

## PROXY FORM

lundersigne	a		
Surname:	Name:		
Place of birth:	e of birth: Date of birth:		
or			
Company bus	siness name:		
Address:			
	Permanent address or registered office	Town	Prov.
Tax id no:			
Tel.:	E-mail.:		
hereby appoint			
Surname:	Name:		
or	•		
Company bus	siness name:		
With the faculty of being substituted by:			
Surname:	Name:		
or			7
Company bus	siness name:		
	behalf at the Shareholders' Meeting of INWIT S.p.A. called on 13 April 2018,	at 11.00 a.m. hours, in Rozzano (Milar	n), Viale Toscana 3
with reference to no ordinary shares of INWIT			
or			
all the ordinary shares of INWIT for which the appropriate notification for attendance at the Shareholders' Meeting has been requested			
DATE	SIGNATURE		_
-	The proxy form may be sent in copy or notified to the Company, to be readdress: INWIT S.p.A. Investor Relations Via Giovanni Battista de Rossi, 30 00161 ROMA - ITALY or by fax to: +39 06 91254356, or by e-mail to the following address: section of the website <a href="www.inwit.it/assemblea">www.inwit.it/assemblea</a> , where further information is Requests for further clarifications or information may be made by:  o calling the toll-free number 800020220 (for calls from inside Italy), the telephone no: +39 011 2293603 (for calls from outside Italy), e-mail address: <a href="mailto:assemblea@pec.inwit.it">assemblea@pec.inwit.it</a>	assemblea@pec.inwit.it, or through the available.	