Computershare

	Name	Computershare PO Box 505013 Louisville, KY 40233-5013 Within USA, US territories & Canada: 866-637-9460	
		Company Name	
		Company Name	
	Address		
	City, State, Zip	Computershare Account Number	
		C	
Rei	investment Plan Election Form	PLEASE PRINT CLEARLY	
1		RMINATE participation in the Reinvestment Plan. noose one option below.) Electronic Deposit (ACH - complete 2 through 6 below) Mail Check to Address of Record Broker or Third Party Payment (complete 2 through 5 below)	
2	Name of Payee (Bank, Brokerage Firm or Individual)*		
3	Distribution Mailing Address	Apt. / Unit Number	
4	City	State Zip Code	
5	Account Number – account numbers vary in length and must not include check num	bers. 6 Bank Routing Number – this is a <u>nine-digit</u> number.	
	Checking Savings Account Account		
7	* If cash distribution is sent to an individual other than the registered owner, a Med SIGNATURE(S) Signature 1 Date		
		Medallion Guarantee Stamp Current Investor(s) or Legal Rep(s) or	
	Signature 2 Date	Custodian (Notary Seal Is <u>Not</u> Acceptable)	
	Custodian Signature (Medallion Guarantee required) * Date		
	Daytime Telephone Number		

Mail completed form to:

Regular Mail

Overnight Delivery

Computershare PO Box 505013 Louisville, KY 40233-5013 Computershare 462 South 4th Street, Suite 1600 Louisville, KY 40202