

Name _____

 Address _____

 City, State, Zip _____

Company Name _____

Computershare Account Number

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Change of Distribution Election Form PLEASE PRINT CLEARLY

- 1** Select the payment method in which cash distributions are to be sent (choose only one):
- Electronic Deposit (ACH - complete 2 through 6 below.)
- Broker or Third Party Payment (complete 2 through 5 below)
- Mail Check to Address of Record

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 numbers. _____

6 Bank Routing Number – this is a nine-digit number. _____

- Checking Account
- Savings Account

* If cash distribution is sent to an individual other than the registered owner, a Medallion Guarantee Stamp is required in the box below.

SIGNATURE(S)

Signature 1 _____ Date _____

Signature 2 _____ Date _____

Custodian Signature (Medallion Guarantee required) * _____ Date _____

Daytime Telephone Number _____

<p>Medallion Guarantee Stamp Current Investor(s) or Legal Rep(s) or Custodian (Notary Seal Is <u>Not</u> Acceptable)</p>

Change of Distribution Election Form (continued)

Mail completed form to:

Regular Mail Computershare
PO Box 43007 Providence, RI
02940-3007

Overnight Delivery
Computershare 150 Royall -
Suite 101 Canton, MA 02021