REQUEST FOR DISPOSITION OF A NONTRANSFERABLE SECURITY

ACCOUNT INFORMATION	
ACCOUNT TITLE:	
SECURITY INFORMATION	
I am currently the owner of the following security, which is o	n deposit with you:
QUANTITY:	
DESCRIPTION:	
CUSIP® NUMBER:	
AUTHORIZATION AND SIGNATURE	
AS SUCH, I WISH TO ELIMINATE THIS POSITION FROM MY ACCOUNT.	BECAUSE THERE IS CURRENTLY NO TRANSFER AGENT,
THE SHARES CANNOT BE REGISTERED IN MY NAME. PLEASE ISSUE	TO ME A NON-NEGOTIABLE CERTIFICATE OF OWNERSHIP
FOR MY NONTRANSFERABLE POSITION AND REMOVE THE POSITION	FROM MY ACCOUNT. IF THE CORPORATION REOPENS ITS
TRANSFER BOOKS, I UNDERSTAND THAT YOU WILL NEED THIS CERT	FIFICATE TO BE PRESENTED IN ORDER FOR MY POSITION TO
BE REESTABLISHED.	
ACCOUNT OWNER'S SIGNATURE:	DATE:
JOINT ACCOUNT OWNER'S SIGNATURE: (If applicable)	DATE:

ADDRESS:	CITY:	STATE:	ZIP:	

CUSIP® belongs to its respective owner.

