



Computershare Trust Co., Inc.
2 North LaSalle Street
Chicago IL 60602

Within the US, Canada & Puerto Rico 800 929 6782
Outside the US, Canada & Puerto Rico 312 360 5209
Facsimile 312 601 4335
www.computershare.com

Joint - Will be presumed to be joint tenants with rights of survivorship unless restricted by applicable state law or otherwise indicated. Only one social security number is required.

Custodial - A minor is the beneficial owner of the account with an adult custodian managing the account until the minor comes of age, as specified in the Uniform Gift/Transfer to Minors Act in the minor's state of residence. Please note that the minor's social security number must be used.

Trust - Account is established in accordance with the provisions of a trust agreement.

Use a black pen. Print in CAPITAL letters inside the grey areas as shown in this example.



Direct Stock Purchase Plan - Initial Enrollment Form

Account Legal Registration (Choose One)

Single/Joint Account **Custodial Account** **Trust Account**
 * You must provide Computershare with the following three pages from the Trust Document: **1. Title Page 2. Powers Page and 3. Signature Page**

Citizenship

USA **Other**
 You must complete a W-8BEN form. Please refer to our website at www.computershare.com or call the phone number above to obtain a form.

Account Information

Name, Custodian Name or Full Trust Name

Joint Owner (if any), Minor's Name or Trustee(s) Name

Date of Birth (Primary Account Holder)

Date of Birth (Joint Account Holder/Minor)

Social Security Number (SSN) or Employer Identification Number (EIN)

Minor's State (if applicable)

Date of Trust (mm/dd/yyyy)

Street Number

Street Name

Apt./Unit Number

City/Town

State

Zip Code



IMPORTANT NOTICE ABOUT OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. When you open an account, we will ask for your name, address, date of birth and taxpayer identification number. This information will allow us to identify you.

If we are not provided with all of the requested information, we will not be able to open the account.



Home Telephone Number

Business Telephone Number

Please refer to the plan prospectus or brochure before enrolling.



Optional Cash Purchases

Please mark this box to make optional cash purchases. Dividend payments on optional cash purchases will be paid in cash.

Under penalties of perjury, I certify that: 1. The number shown on this form is my correct taxpayer identification number, and 2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3. I am a U.S. person (including a U.S. resident alien).

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

By participating in the plan, I agree to be bound by the terms and conditions of the prospectus or brochure that governs the plan. I have read and fully understand the terms and conditions of the prospectus or brochure. I further agree that my participation in the plan will continue until I notify Computershare Trust Co., Inc. in writing that I desire to terminate my participation in the plan. Upon providing such notification, I acknowledge that my withdrawal from the plan will be subject to the terms and conditions of the prospectus or brochure that governs the plan. By signing this form, I am certifying that I am of legal age in the state or country of my residence.

Enrollment forms will be processed within 5 business days of receipt. Confirmation of enrollment will not be mailed; however, a transaction statement will be mailed once there is activity in your account. If you would like to confirm your enrollment in the plan, please call us at the number referenced on the front page.

To be valid, this form must be signed by all account holders.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Please return completed form to:

Computershare
P.O. Box 3309 Chicago IL 60690-3309

Signature 1 - Please keep signature within the box.

Signature 2 - Please keep signature within the box.

Date (mm/dd/yyyy)

Please enclose a check for your initial investment plus a \$10.00 enrollment fee (if applicable).

Make checks payable to Computershare Trust Company. Please refer to the plan prospectus or brochure for the minimum/maximum amount of the initial investment. No interest will be paid on the funds held pending investment.

Privacy Notice

At Computershare, we take privacy seriously. In the course of providing services to you in connection with employee stock purchase plans, dividend reinvestment plans, direct stock purchase plans and/or direct registration services, we receive nonpublic personal information about you. We receive this information through transactions we perform for you, from enrollment forms and through other communications with you. We may also receive information about you by virtue of your transactions with affiliates of Computershare or other parties. This information may include your name, social security number, stock ownership information and other financial information.

With respect both to current and former customers, Computershare does not share nonpublic personal information with any non-affiliated third party except as necessary to process a transaction, service your account or as permitted by law. Our affiliates and outside service providers with whom we share information are legally bound not to disclose the information in any manner, unless permitted by law or other governmental process. We strive to restrict access to your personal information to those employees who need to know the information to provide our services to you. Computershare maintains physical, electronic and procedural safeguards to protect your personal information.

Computershare realizes that you entrust us with confidential personal and financial information and we take that trust very seriously.





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For a change of address or to obtain a form, please visit us at www.computershare.com or call us at the above telephone number.

Holder Account Number

Use a black pen. Print in CAPITAL letters inside the grey areas as shown in this example.

Direct Stock Purchase Plan - Direct Debit Authorization - Monthly

The funds will be withdrawn on the 15th of the month or the next business day.

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Dollar Amount:

This plan allows for a minimum amount of \$50 with a maximum of \$250,000 per year.

Financial Institution Information

A. Please select one. Individual Joint Other

B. Please select one. Checking Account Savings Account

Financial institution account number

Financial institution routing number

Note: DO NOT USE A CREDIT CARD. If you do not know your account number or the routing number, please see the reverse side of this form or check with your financial institution.

Name(s) in which the above account is held

Note: If you are not currently enrolled in this company's plan, by signing this form, you will automatically be enrolled in the plan for full dividend reinvestment. All your dividends will be used to purchase additional shares.

I/We hereby authorize Computershare to make quarterly automatic transfers of funds from the above account in the amount shown. This deduction will be used to purchase shares to be deposited into my/our account. **All owners of the financial institution account must sign below.**

Signature 1 - Please keep signature within the box.

Signature 2 - Please keep signature within the box.

Date (mm/dd/yyyy)

/ /

Daytime Telephone Number

Please return completed form to:

**Computershare
P.O. Box 0289
Chicago IL 60690-0289**



5 U E M D

A D C T C H I L



How to complete this form

1. This company plan offers only monthly deductions. Check the box to confirm your agreement.
2. Amount of automatic deduction: Indicate the amount authorized to transfer from your account to purchase additional shares.
3. Indicate the type of account held with the financial institution.
4. Indicate checking or savings.
5. Print the complete financial institution account number.
6. Print the financial institution routing number from your check or savings deposit slip. **If you are using a savings account, contact your financial institution for the routing number.**
7. Print the name(s) in which the financial institution account is held.
8. All authorized owners of the financial institution account must sign this form.

SAMPLE CHECK

Name(s) in which bank account is held	<div style="display: flex; justify-content: space-between;"> <div style="width: 80%;"> <p>John A. Doe Mary B. Doe 123 Your Street Anywhere, U.S.A. 12345</p> </div> <div style="width: 15%; text-align: right;"> <p>63-858 670</p> </div> </div> <div style="text-align: right; margin-top: 10px;">_____ 20 _____</div>
Financial institution and branch information	<div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p>PAY TO THE ORDER OF _____</p> </div> <div style="width: 25%; text-align: right;"> <p>\$ []</p> </div> </div> <div style="margin-top: 10px;"> <p>Bank of Anywhere 123 Main Street Anywhere, USA 12345</p> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 60%;">FOR _____</div> <div style="width: 35%; text-align: right;">SAMPLE (NON-NEGOTIABLE)</div> </div>
	<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>⌋ 23456789</p> <div style="border: 1px solid black; width: 50px; height: 15px; margin: 0 auto;"></div> <p>Routing number</p> </div> <div style="text-align: center;"> <p>⌋ 234567890 ⌋ 234567</p> <div style="border: 1px solid black; width: 50px; height: 15px; margin: 0 auto;"></div> <p>Account number</p> </div> </div>