

REQUEST FOR DISPOSITION OF A NONTRANSFERABLE SECURITY

I. ACCOUNT INFORMATION

ACCOUNT TITLE: _____

ACCOUNT NUMBER: -

II. SECURITY INFORMATION

I am currently the owner of the following security, which is on deposit with you:

QUANTITY: _____

DESCRIPTION: _____

CUSIP® NUMBER: _____

III. 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 CERTIFICATE 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.

RETURN COMPLETED FORM TO:

ALIGHT FINANCIAL SOLUTIONS
PO BOX 563901
CHARLOTTE NC 28256-3901
FAX: 1.847.554.1444



DISP