

Fully paid Securities Lending (FPL) Program

Written instructions form

Account and/or Security Exclusions/Inclusions

Accounts to be **excluded** from the FPL Program (as of date below)

Account number	Accountholder name(s) <i>(If joint account, both joint accountholders' names)</i>
.....
.....

Securities to be **excluded** from the FPL Program (as of date below)

Account number	Accountholder name(s) <i>(If joint account, both joint accountholders' names)</i>	Security	Symbol
.....
.....
.....
.....

Revocation of previous exclusion instructions with respect to following the securities to be **included** in the FPL Program (as of date below)

Account number	Accountholder name(s) <i>(If joint account, both joint accountholders' names)</i>	Security	Symbol
.....
.....

Accountholder (or authorized representative) signature(s):

X _____ X _____

For individuals: If any of the securities accounts designated in this form are joint accounts, both joint accountholders must sign this form.

For legal entities: If you are signing on behalf of a legal entity accountholder, you certify that you are a duly authorized representative of the accountholder with respect to the instructions contained in this form.

Dated as of: _____