

For your protection, a representative may call you at the number on file for your account to confirm this transaction before it is processed.

ACCOUNT HOLDER NAME (PLEASE PRINT IN ALL CAPITAL LETTERS)

JPMS Account Number

Use this form to authorize J.P. Morgan Securities LLC ("JPMS") to remove securities from your brokerage account and reregister the securities directly with the Transfer Agent.

Please be aware:

- All shares are held electronically and will be re-issued electronically via book-entry securities.
- Reregistered securities will no longer be held in the JPMS account.
- The Transfer Agent will be responsible for sending you periodic statements of the reregistered securities at your address of record.
- A fee will be applied for each security listed on this form. Please refer to your Brokerage Account Fee Schedule for details.

1. Reregistration Instructions

Ownership Type (select one)

- Same Name** - Reregister my securities directly with the Transfer Agent in the same JPMS Account Holder Name.
- Third Party** - Reregister my securities directly with the Transfer Agent in the name of a non-Account Holder (i.e., transfer ownership). Complete the third party information below and Section 5 of this form.

Third Party Name

Social Security Number/Tax ID Number

Mailing Address

City

State

Zip Code

2. Description of Securities - list the securities to be reregistered

Please Note:

- Select "ALL" if you are reregistering all the shares of the corresponding security.
- If more than eight (8) securities need to be reregistered, then submit additional copies of this form.

ALL	NO. OF SHARES	NAME OF SECURITY	SYMBOL/CUSIP
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			
<input type="checkbox"/>			

INVESTMENT PRODUCTS ARE:

- NOT FDIC INSURED • NOT A DEPOSIT OR OTHER OBLIGATION OF, OR GUARANTEED BY, JPMORGAN CHASE BANK, N.A. OR ANY OF ITS AFFILIATES • SUBJECT TO INVESTMENT RISKS, INCLUDING POSSIBLE LOSS OF THE PRINCIPAL AMOUNT INVESTED

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3. Payment Method

How would you like to pay for the reregistration fee? (select one)

- Cash in account provided above
- Attached Check

Please make check payable to:

J.P. Morgan Securities LLC FBO: (Client's Name)

Include the Account Number in the check memo line.

Please Note:

- The total fee will be determined by multiplying the number of securities listed in Section 2 on this form by the applicable fee on your Brokerage Account Fee Schedule.
- If you selected "Cash in account provided above", please ensure sufficient cash is available in your account.
- If paying by check, please be sure to include the check and that it is submitted with this form to the delivery address listed below.

Please refer to the Fee Schedule for Self-Directed Investing Accounts at www.Chase.com/sdi-fees.

4. Account Holder Signature(s)

PLEASE NOTE: If you require more than two Account Holder Signatures, please submit an additional copy of the Reregister Shares at Transfer Agent form.

Account Holder Signature

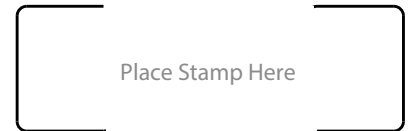
Date (mm/dd/yyyy)

Notary - only complete this section if Third Party Ownership Type was selected in Section 1

Notary section must be completed by a Notary Public

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF _____)
) SS:
 COUNTY OF _____)



Subscribed, sworn to and acknowledged before me by

Name of Document Signer

this _____ day of _____, _____
Month Year

X _____
Signature of Notary Public Date (mm/dd/yyyy) My commission expires: _____

[Section 4 continued on Page 3.]

ACCOUNT HOLDER NAME (PLEASE PRINT IN ALL CAPITAL LETTERS)

JPMS Account Number

[Section 4 continued from Page 2.]

4. Account Holder Signature(s)

Joint Account Holder Signature (if applicable)

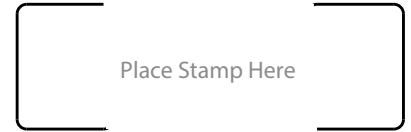
Date (mm/dd/yyyy)

Notary - only complete this section if Third Party Ownership Type was selected in Section 1

Notary section must be completed by a Notary Public

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF _____)
COUNTY OF _____) SS:



Subscribed, sworn to and acknowledged before me by

Name of Document Signer

this _____ day of _____, _____
Month Year

Signature of Notary Public Date (mm/dd/yyyy) My commission expires: _____

Please keep a copy of this form for your records.

After reviewing and signing this form, please select how you'd like to submit it:

- **Fax:** send the form and any attachments to (866) 786-4780
- **Email:** please visit www.Chase.com/brokerageforms for instructions on how to submit this completed document and any attachments
- **Regular or Overnight Mail:** send the form and any attachments to:

J.P. Morgan Securities LLC
Attn: JPMS Cashiers Dept.
Mail Code NY1-C060
4 Chase Metrotech Center
Brooklyn, NY 11245-0001

Questions? Please call us at (800) 392-5749.