

Name _____

Address _____

City, State, Zip _____

Company Name _____

Computershare Account Number

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Reinvestment Plan Election Form PLEASE PRINT CLEARLY

1 **BEGIN** participation in the Reinvestment Plan:
 I hereby direct that future cash distributions be used to purchase additional shares through the Reinvestment Plan.

TERMINATE participation in the Reinvestment Plan.
 (Choose one option below.)

Electronic Deposit (ACH - complete 2 through 6 below)

Mail Check to Address of Record

Broker or Third Party Payment (complete 2 through 5 below)

2 Name of Payee (Bank, Brokerage Firm or Individual)*

3 Distribution Mailing Address _____ Apt. / Unit Number _____

4 City _____ State _____ Zip Code _____

5 Account Number – account numbers vary in length and must not include check numbers.

6 Bank Routing Number – this is a nine-digit number.

Checking Account Savings Account

* If cash distribution is sent to an individual other than the registered owner, a Medallion Guarantee Stamp is required in the box below.

7 SIGNATURE(S)

Signature 1 _____ Date _____

Signature 2 _____ Date _____

Custodian Signature (Medallion Guarantee required) * _____ Date _____

Daytime Telephone Number _____

Medallion Guarantee Stamp
 Current Investor(s) or Legal Rep(s) or
 Custodian (Notary Seal Is Not Acceptable)

Reinvestment Plan Election Form (continued)

Mail completed form to:

Regular Mail

Computershare
PO Box 505013
Louisville, KY 40233-5013

Overnight Delivery

Computershare
462 South 4th Street, Suite 1600
Louisville, KY 40202