

Company or Trust in which Investment is Held

Name and address of CHESS controlling participant

You are required to insert this number

CHESS Original Transaction ID

Holder Identification Number (HIN)

Request for Clarification of Registration Details

To enable an Issuer to request CHESS Administration to seek clarification of Registration Details sent by a Participant for a CHESS Holder

Use a black pen. Print in CAPITAL letters inside the boxes

A Registration Details of Securityholder

Individual Holder/Joinholder #1 or Company Name

Joinholder #2 or <Designated Account>

Joinholder #3 or <Designated Account>

Address Details

Unit Street Number Street Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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OR Post Office Box or other mail details (if applicable)

City/Suburb/Town

State

Post Code

B Reason for Request

Registry to insert text here. _____

Signature of Authorised Officer

Name of Authorised Officer

Stamp of Lodging Register

Telephone Number of Authorised Officer

Day Month Year

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
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