

This subscription form:

is a new subscription is an additional request supersedes and replaces all previous subscription form(s)

We, the undersigned, representing

Registered name of the customer (in full):

(the "**Company**") whose registered office is at (insert address in full):

Address: _____

City: _____ Post code: _____ Country: _____

hereby subscribes to the proxy voting services, as set out in the Terms and Conditions of the Proxy Voting Services, attached hereto as Appendix 2 (hereinafter the "**Proxy Voting Services**"), by completing this subscription form and its appendices, including Appendix 3 where relevant.

for:

all existing CASCADE main accounts (including the eligible CASCADE sub-accounts) of the Company at Clearstream Banking Frankfurt (CBF) at the date hereof.

the following CASCADE main account numbers at the date hereof (if applicable, please indicate the relevant eligible CASCADE sub-account numbers for the respective CASCADE main account) of the Company at CBF as listed in the Annex to the Subscription Form (please complete the Annex accordingly)

all existing CBF-i (Creation) account numbers of the Company at CBF at the date hereof.

the following CBF-i (Creation) account numbers of the Company at CBF as listed in the Annex to the Subscription Form (please complete the Annex accordingly) at the date hereof.

(the "**Accounts**").

Any existing power of attorney with respect to proxy voting services already in place with CBF prior to this subscription form are deemed to be revoked for the above mentioned Accounts as from the Effective date as defined in the Terms and Conditions.

Authorised signature(s):

We hereby acknowledge receipt of the Terms and Conditions of the Proxy Voting Services (Appendix 2) and expressly confirm our acceptance to be bound by its terms and conditions.

For and on behalf of

Signature: _____

Signature: _____

Name: _____

Name: _____

Title: _____

Title: _____

Place: _____

Place: _____

Date: _____

Date: _____

Please complete the Annex to the Subscription Form (if applicable), Appendix 1 (mandatory) and Appendix 3 (optional) and return with this completed original subscription form to the following mailing address:

Clearstream Banking Frankfurt Account Administration Frankfurt (OSM) D-60485 Frankfurt

Appendices:

Annex: List of account numbers

Appendix 1: Contact details

Appendix 2: Terms and Conditions of the Proxy Voting Services

Appendix 3: Power of Attorney

List of account numbers

I. CASCADE main account numbers (if applicable, please indicate the relevant eligible CASCADE sub-account numbers for the respective CASCADE main account)¹

_____ / _____	_____ / _____	_____ / _____
_____ / _____	_____ / _____	_____ / _____
_____ / _____	_____ / _____	_____ / _____
_____ / _____	_____ / _____	_____ / _____
_____ / _____	_____ / _____	_____ / _____
_____ / _____	_____ / _____	_____ / _____

II. CBF-i (Creation) accounts

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

¹ These CASCADE sub-account types are eligible:
sub-account type "customer account"
sub-account to report not sold, repurchased or/and no longer sold securities
sub-account for settlement of cross border SE trades
sub-account for automated securities lending
sub-account for the separation of qualified minority holdings
sub-accounts to take account of U.S. withholding tax provisions
sub-accounts for partial exemption from French withholding tax
sub-account for pending transactions in relation to voluntary corporate action events
sub-account for settlement - of CASCADE foreign currency trades
- of security sales against payment via RTS

for example, XXXX 001
for example, XXXX 410
for example, XXXX 492
for example, XXXX 510
for example, XXXX 650
for example, XXXX 802-812
for example, XXXX 828-835
for example, XXXX 850

for example, XXXX 995
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