

Request for Payment of Dividends or Interest "Mandate"

(Above this line for official use only)

Name and Address of Registrar	To: Capita Registrars (Ireland) Limited , P.O. Box 7117, Dublin 2. Ireland			
Name of Company in which shares, stocks of units are held.				
<p>Full name and address Of first registered holder should be given together with the full names of all other holders (if any).</p> <p>Please state also old address if the one shown is different to that registered.</p> <p>Please insert account designation (if applicable) in the box provided.</p> <p>Where the stock or units are in the name of a deceased holder, this form should indicate the name of the deceased and be signed by all of the executor(s) or administrators</p>	Please complete in BLOCK CAPITALS	Account Designation (if any)		
	1) Name in full _____ Address _____ _____			
	Old Address _____ _____	Post code _____		
	2) Name in full _____ 3) Name in full _____ 4) Name in full _____			Post code _____
<p>Please forward until further notice all Dividends or Interest that may from time to time become due on any stock, shares or units now standing or which may hereafter stand in my/our name(s) as shown above (or in the name(s) of the survivor(s) of us) in the register to the following, or where payment is to be made to a Bank or Building Society to such other branch of the same recipient as may from time to time be requested by that Bank or Building Society. Your compliance with this request shall discharge the liability of the Company or other body in respect of such Dividends or Interest.</p> <p>1. ----- 2. ----- 3. ----- 4. -----</p> <p>ALL the registered holders must sign this form. Where execution is on behalf of a body corporate (whether or not the body corporate uses a common seal) each signatory should state their representative capacity (e.g. Company Secretary, Director)</p> <p style="text-align: right;">Date : _____</p>				

PLEASE PROVIDE BELOW DETAILS TO WHOM PAYMENTS ARE TO BE MADE

<p>Full Name and Address of the Bank, Building Society, Firm or Person to whom payments are to be made.</p> <p>Directions to credit a particular type of account must be given to the recipient direct and not included on this form.</p> <p>This form will be rejected if "Correction Fluid" has been used to make amendments</p>	<p>Bank Name _____</p> <p>Address : _____ _____ _____ Post code _____</p>
<p><i>THE INFORMATION BELOW SHOULD BE COMPLETED BY THE HOLDER(S) AND CONFIRMED BY THE BANK OR BUILDING SOCIETY</i></p>	
Branch Title	Currency:
Sorting Code	Account Number
If the instructions are in favour of a Bank or Building Society the form should be given to the Bank or Building Society for confirmation, stamping and onward transmission to the Registrar.	STAMP OF BANK OR BUILDING SOCIETY BRANCH