

SIGN UP FORM - PAGE 1 OF 2

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Primary Contact Information

The primary contact is responsible for review, approval and indicating when to initiate launch of the online documents and hosting.

Company ID	<input type="text"/>
First Name	<input type="text"/>
Last Name	<input type="text"/>
Company	<input type="text"/>
CUSIP #	<input type="text"/>
Email	<input type="text"/>
Repeat Email	<input type="text"/>
Phone	<input type="text"/>
Address	<input type="text"/>
Address (2)	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
ZIP	<input type="text"/>

Billing Information

Invoice is sent after your job is complete.

Send electronic invoice
 Send paper invoice in the mail

Billing is the same as primary contact

First Name	<input type="text"/>
Last Name	<input type="text"/>
Company	<input type="text"/>
Email	<input type="text"/>
Repeat Email	<input type="text"/>
Phone	<input type="text"/>
Address	<input type="text"/>
Address (2)	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
ZIP	<input type="text"/>

Additional Contact for Review and Approval

Name	<input type="text"/>
Email	<input type="text"/>
Phone	<input type="text"/>

Mailing Date Information

Mailing Date

Please enter an approximate date if an official date is not available yet.

Please continue on page 2 of this form...

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Document Conversion Choices - Review at <http://www.cstproxy.com>

Enhanced Interactive Basic

Document 1

Name

Example: ACME's Annual Report 2011

PDF Delivered
On (Date) *

* After PDF is delivered, 1 business day turnaround(Basic)
3 day(Enhanced or Interactive). Rush pricing available.
Enter approximate date if an official date is not available yet.

Delivered By

Primary Contact
 Scotti Graphics
 Other

If other selected for "delivered by", please specify:

Name:

Email:

Phone:

Document 2

Name

PDF Delivered
On (Date) *

If other selected for "delivered by", please specify:

Delivered By

Primary Contact
 Scotti Graphics
 Other

Name:

Email:

Phone:

Document 3 (if necessary)

Name

PDF Delivered
On (Date) *

If other selected for "delivered by", please specify:

Delivered By

Primary Contact
 Scotti Graphics
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Name:

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FAX completed two-page form to (212) 509-5152

Quote will be provided and it will include online document hosting on CSTProxy.com