



APPLICATION

DIRECT DEPOSIT DIVIDENDS

I/We authorize that all future dividend payments are to be deposited to the following account:

Name of Shareholder:	
Home Address:	
Mailing Address: [If different from home address]	
Home phone #:	Work phone #:
Mobile phone #:	
Email: [If you wish your Direct Deposit slip sent via email complete the above]	
<p>To avoid your email being bounced back thinking it is a scam as we are sending out numerous emails, we suggest that you add shareregistry@ascendant.bm to your contacts or to your white list group. This will ensure that the email is not blocked by any email services as potential spam. Failure to do so can result in the email being sent to your junk\spam folder or not allowed through at all to your mailbox. Please consult your email provider if further assistance is needed.</p>	
Bermuda Local Banks: [Please check your bank choice] <input type="checkbox"/> HSBC BERMUDA <input type="checkbox"/> BUTTERFIELD BANK <input type="checkbox"/> CLARIEN BANK	
Account Type: [Please check your type of account] <input type="checkbox"/> CHEQUING <input type="checkbox"/> SAVINGS	
Account Number:	
<input type="checkbox"/> BDA\$ <input type="checkbox"/> US\$ ACCOUNT	
Signature:	
Dated this day of 2019	
Completed form should be mailed to the mailing address for the attention of Ms. Jean E. Kromer or can be e-mailed to jkromer@ascendant.bm .	