

# Payment & Contact Information Update

## SECURITYHOLDER INSTRUCTIONS TO PAYING/ESCROW AGENT

**Instructions to Paying/Escrow Agent:** Please ensure the below changes are made in your system.

**Instructions to Securityholder:** For individuals, this form must be completed and signed by the securityholder named on the Letter of Transmittal (LOT) provided at the time of closing. For entities, an authorized signatory of the securityholder named on the LOT must complete and sign this form. SRS does not verify the accuracy or completeness of the information provided and is not responsible for any errors in such information. We will forward this form to the paying/escrow agent on your behalf. For assistance, please contact us at 415-263-9018 or [support@srsacquiom.com](mailto:support@srsacquiom.com).

Name of Selling Company:	Securityholder Name: <i>(as shown on LOT)</i>
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### SECTION 1 - Change My Address or Contact Information

Attention / Care Of:	
Address:	
City, State, ZIP, Country:	
Phone:	Email:

### SECTION 2 - Change My Payment Method

<input type="checkbox"/> Check by Mail (complete Section 1)	<input type="checkbox"/> Direct Deposit (ACH) * (complete Section 3) <i>* only available for U.S.-domiciled securityholders</i>	<input type="checkbox"/> Wire Transfer (complete Section 3)
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### SECTION 3 - Change My Account

Account Owner:	
ABA/Routing # (9 Digits):	SWIFT:
Bank Name & Address:	
Account Number:	
For Further Credit To: <i>(if applicable)</i>	Account #:

Please sign and date below if you have made changes in Section 1, Section 2, or Section 3.

Signature:	Title: <i>(if an entity)</i>	Date:
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## SECTION 4 - Change The Payee

Please complete this section if future payments are to be made to a payee other than the registered securityholder.

Name of "Old" Payee (the securityholder listed on the LOT) as the "Assignor":  Name: Contact Phone Number: Email Address:	Name of "New" Payee(s) as the "Assignee(s)" *:  Name: Contact Phone Number: Email Address:  * Please complete Sections 1, 2 and/or 3 of this form, to the extent applicable, for the new Payee(s).
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Please indicate the reason for changing the payee:

**Death**     
  **Divorce**     
  **Entity Dissolution**     
  **Other Assignment**

Are 100% of the escrow interests or other payment rights being transferred?

**Yes**     
  **No**

If No, please specify below (1) the percentage of payment rights being transferred to each Assignee; and (2) if any percentage of ownership interest is being retained by the Assignor (the "Old" Payee). If you have a schedule of ownership interest, please attach to this form.

Individual/ Entity Name: \_\_\_\_\_ Percentage of Ownership/Payment Rights after Transfer: \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

- Documents** to send in with your completed Section 4 information:
- For changes due to **death**, please provide a Form W-8 or Form W-9 (as applicable) for the new payee(s)/ assignee(s).
  - For changes due to **divorce**, please provide (1) any assignment or settlement documentation relating to the transfer of ownership interest; and (2) a Form W-8 or Form W-9 (as applicable) for the new payee(s)/ assignee(s).
  - For changes due to **entity dissolution or other assignments**, please provide (1) a copy of the assignment or transfer documentation; and (2) a Form W-8 or Form W-9 (as applicable) for the new payee(s)/ assignee(s).

<p><b>Special Signature Requirements</b> for Section 4 Transfers/ Assignments:</p>  "New" Payee (Assignee): _____  Signature: _____  Title (if entity): _____	<p><b>Signature Guarantee</b></p> <p><i>**Only the Assignor (Old Payee) signature must be medallion signature guaranteed by an "Eligible Guarantor Institution" (Banks, Stockbrokers, Savings and Loan Associations and Credit Unions) with membership in an approved Signature Guarantee Medallion Program, pursuant to Securities and Exchange Commission Rule 17Ad-15.)</i></p> Signature: _____ Date: _____  Title (if entity): _____					
	<p><b>Medallion Guarantee Stamp</b></p>					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; height: 40px;"></td> <td style="width: 20%; padding: 2px;">Guarantor Institution:</td> </tr> <tr> <td style="height: 40px;"></td> <td style="padding: 2px;">Guarantor Contact:</td> </tr> <tr> <td style="height: 40px;"></td> <td style="padding: 2px;">Guarantor Phone:</td> </tr> </table>		Guarantor Institution:		Guarantor Contact:	
	Guarantor Institution:					
	Guarantor Contact:					
	Guarantor Phone:					

*Your signature and today's date are required if changes have been made in this Section 4.*