

**Appendix A - For Exempt Pension funds resident in Netherlands,
Switzerland, United Kingdom and USA**

To: _____

(insert name and address of depository bank)

Re: Withholding Certification for _____
(insert name of issuer);

CUSIP# _____ *(insert CUSIP number)*

I / We the undersigned _____
(insert name of the Clearstream Banking S.A. customer authorised person),

authorised representative of _____

(insert Clearstream Banking S.A. customer name) holding shares at Clearstream Banking S.A. under Account number
_____ *(insert account number in Clearstream Banking S.A.)* of _____

(insert name of issuer), CUSIP# _____ *(insert CUSIP number)*, request that the upcoming cash
dividend payable to holders as of _____ *(insert record date)*, receive their entitled tax reclaim.

Name of Beneficiary	Complete Address	Country of Residence	Tax ID Number	# ADRs
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

I/We certify that to the best of my knowledge the above beneficial owners are eligible for the preferential rates as stated herein and I/we declare that I/we have performed all the necessary due diligence to satisfy myself/oourselves as to the accuracy of the information submitted to me/us by these beneficial owners.

(insert name and address of depository bank)

is not liable for failure to secure the refund and any funds erroneously received shall be immediately returned to

(insert name and address of depository bank),

including any interest, additions to tax or penalties thereon. This is not tax advice. Please consult your tax advisor.

Incorrect claims and/or elections could result in fines and/or penalties.

PRINT NAME OF SIGNATORY _____ TELEPHONE _____

POSITION OF THE SIGNATORY _____ FAX _____

SIGNATURE OF AUTHORISED PERSON _____