Request to the Dutch Tax Authorities for Tax Refund as prescribed by a DTT

Belastingdienst/Centrum voor facilitaire dienstverlening Afdeling Logistiek reprografish centrum PO Box 1314 7301 BN Apeldoorn The Netherlands

The beneficial owner certifies that:

(continued on next page)

Dear Sir/Madam,						
We wish to make an app	•					
	, Article	, for the	repayment of	withholding tax	es on divide	nds.
The beneficial owner of the	e securities is a	as follows.				
Full name of benefic	cial owner:					
Legal status of bene	eficial owner:					
Address (tax resider	nce) of benefic	ial owner:				
The beneficial owner claim dividends specified below:	ns a refund of	the amount of		ding tax indicate		
Issuing company and type of security	Payment date	Number of shares	Gross amount of income	Tax Withheld (EUR)	DTT rate (%)	Refund amount (EUR)
				Total refund am	ount (EUR)	

1. By virtue of the beneficial owner's title to ownership of the securities specified above on the payable date(s) specified above, the beneficial owner was, is or will be beneficially entitled to the income specified above.

Request to the Dutch Tax Authorities for Tax Refund as prescribed by a DTT (cont)

(continued from previous page)			
2. On the payable date(s) specified above, the benef	icial owner was, is or will be a resident of		
within the meaning of the Netherlands	Double Taxation Convention.		
3. On the payable date(s) (tick one box only):			
The beneficial owner had (has, will ha Netherlands.	ve) no permanent establishment or fixed base in The		
OR			
carried on through the permanent establi	re not, will not be) effectively connected with any business shment or with independent personal services performed ner had (has, will have) in The Netherlands.		
Note: If this circumstance applies, pleas fixed base, as follows:	e provide details of the permanent establishment or the		
(Trading) Name:			
Address in The Netherlands:			
	vour of account number of, with the reference "tax refund".		
Yours faithfully,			
Authorised Signature	Authorised Signature		
Name	Name		
Title	Title		
Place	Date		
We attach the following documentation in support of thi	s claim:		
Original certificate of tax residence of the benefit	cial owner of the securities and dividend;		
 Power of Attorney (if the customer is signing the 	documentation on behalf of the beneficial owner);		

• Credit advice - payment detail voucher confirming the payment details listed above.