

S.W.I.F.T. Access

From

(Company name & address)

To

Please complete this form and send it to

Euroclear Bank S.A./N.V.
 1 Boulevard du Roi Albert II
 B-1210 Brussels - Belgium
 Attention: Client Service Administration

Please be advised that we have granted to:

Name: **SIS SEGAINTERSETTLE AG**

Address: **Brandschenkestr. 47**
CH-8002 Zurich

Bank Identifier Code (BIC) **| I | N | S | E | C | H | Z | Z | X | X | X |**
 (the "Agent")

full power and authority to transmit instructions and cancellations by S.W.I.F.T. for:

- all Securities Clearance Accounts and related Cash Accounts, and any other accounts that may be opened from time to time by us, or
- our Securities Clearance Account _____ (number), and the associated Cash Account, maintained on the books of Euroclear Bank.

You are hereby authorised to accept any and all instructions from, send failed instruction reports to, and provide any and all validation reports related thereto to the Agent for the above account(s). All S.W.I.F.T. instructions received from the Agent will be processed in accordance with the Terms and Conditions Governing Use of Euroclear, the Supplementary Terms and Conditions Governing the Lending and Borrowing of Securities through Euroclear (if applicable), the Operating Procedures of the Euroclear System ("Operating Procedures") and the General Conditions Governing Extensions of Credit to Participants in the Euroclear System (if applicable). You may rely upon the accuracy of any data received from the Agent without any further inquiry or examination.

We acknowledge that we will be fully responsible, and will indemnify Euroclear Bank, for all liability which may arise as a result of any instruction given by the Agent for the above account(s).

Any revocation of this authorisation will take effect on the Business Day (as defined in the Operating Procedures) following that upon which you receive written notice of revocation by us. We understand and hereby agree that any instruction received by you prior to the effectiveness of any such revocation will be processed in accordance with the Operating Procedures.

This authorisation is governed by and construed in accordance with the laws of Belgium.

 Name and title of authorised signatory

 Authorised signature

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 Authorised signature

 Place

 Date