

Part IV Information on Financial Account(s) Where Filer has Signature Authority but No Financial Interest

Account Information	
15 Maximum account value	15a <input type="checkbox"/> Maximum account value unknown
16 Type of account	a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below _____ of _____
17 Name of Financial Institution in which account is held	
18 Account number or other designation	19 Mailing Address (Number, Street, and Apt. or Suite No.)
20 City	21 Province\State
22 Postal Code	23 Country

Account Owner Information	
34 Last Name or Organization Name	35 TIN
35a TIN type a <input type="checkbox"/> EIN b <input type="checkbox"/> SSN\TIN c <input type="checkbox"/> Foreign	36 First Name
37 M.I.	
38 Address (Number, Street, and Apt. or Suite No.)	39 City
40 State/Province	41 ZIP/Postal Code
42 Country	43 Filer Title - Account Owner

Account Information	
15 Maximum account value	15a <input type="checkbox"/> Maximum account value unknown
16 Type of account	a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below _____ of _____
17 Name of Financial Institution in which account is held	
18 Account number or other designation	19 Mailing Address (Number, Street, and Apt. or Suite No.)
20 City	21 Province\State
22 Postal Code	23 Country

Account Owner Information	
34 Last Name or Organization Name	35 TIN
35a TIN type a <input type="checkbox"/> EIN b <input type="checkbox"/> SSN\TIN c <input type="checkbox"/> Foreign	36 First Name
37 M.I.	
38 Address (Number, Street, and Apt. or Suite No.)	39 City
40 State/Province	41 ZIP/Postal Code
42 Country	43 Filer Title - Account Owner

Account Information	
15 Maximum account value	15a <input type="checkbox"/> Maximum account value unknown
16 Type of account	a <input type="checkbox"/> Bank b <input type="checkbox"/> Securities c <input type="checkbox"/> Other - Enter below _____ of _____
17 Name of Financial Institution in which account is held	
18 Account number or other designation	19 Mailing Address (Number, Street, and Apt. or Suite No.)
20 City	21 Province\State
22 Postal Code	23 Country

Account Owner Information	
34 Last Name or Organization Name	35 TIN
35a TIN type a <input type="checkbox"/> EIN b <input type="checkbox"/> SSN\TIN c <input type="checkbox"/> Foreign	36 First Name
37 M.I.	
38 Address (Number, Street, and Apt. or Suite No.)	39 City
40 State/Province	41 ZIP/Postal Code
42 Country	43 Filer Title - Account Owner