



4626 South Broadway  
 Englewood, CO 80113  
 (303) 662-1112 PHONE  
 (303) 662-1113 FAX  
[www.transhare.com](http://www.transhare.com)  
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# LETTER OF INSTRUCTION

## Transfers

**You must submit original certificates with this Letter of Instruction.** Shares held in Book-entry form need not be submitted, though this form must still be completed. Each stock certificate submitted with this letter of instruction must have a properly executed stock power that includes an original signature with a Medallion Guarantee.

**A CHECK COVERING THE COST OF THIS TRANSFER INCLUDING MAILING FEES MUST ACCOMPANY THIS PACKAGE**

**ISSUER NAME:** \_\_\_\_\_

### PRESENITOR

**\*\* IF PRESENITOR IS NOT THE ISSUER OR REGISTERED SHAREHOLDER, A 3RD PARTY RELEASE WILL BE REQUIRED\*\***

<b>NAME:</b>	<b>PHONE NUMBER:</b>	<b>E-MAIL ADDRESS:</b>	
<b>ADDRESS:</b>	<b>CITY:</b>	<b>STATE:</b>	<b>ZIP:</b>
<b>SIGNATURE(S) OF PRESENITOR:</b> _____			
<small>If signature is by a trustee, executor, administrator, guardian, attorney-in-fact, corporate officer or other acting in a fiduciary or representative capacity, it must be so indicated and proper evidence must be submitted with this package.</small>			

### CERTIFICATES PRESENTED FOR TRANSFER

CERTIFICATE #	SHAREHOLDER NAME (LISTED ON FACE OF CERTIFICATE)	NUMBER OF SHARES
		TOTAL SHARES

### COST BASIS REQUIRED FOR ALL TRANSFERS THAT INCLUDE A CHANGE OF BENEFICIAL OWNERSHIP

<input type="checkbox"/> SALE	DATE OF SALE:	SALE PRICE PER SHARE: \$
<input type="checkbox"/> GIFT	DATE OF GIFT:	FAIR MARKET VALUE PER SHARE ON GIFT DATE: \$
<input type="checkbox"/> INHERITANCE	DATE OF DEATH:	FAIR MARKET VALUE PER SHARE ON DATE OF DEATH: \$

### REGISTRATION OF NEW CERTIFICATE(S)

CHECK IF MORE THAN ONE TRANSFEREE (FILL OUT ADDENDUM ON PAGE 2)

NAME(S): \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ -OR- TAX ID NUMBER: \_\_\_\_\_

INDIVIDUAL  CORPORATION  PARTNERSHIP  LLC  TENANTS IN COMMON  TENANTS BY THE ENTIRETIES  JOINT TENANTS  JTWROS  TRUST

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE/PROV.: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

\_\_\_\_\_ CERTIFICATES X \_\_\_\_\_ SHARES = \_\_\_\_\_ **TOTAL SHARES ISSUED**

\_\_\_\_\_ CERTIFICATES X \_\_\_\_\_ SHARES = \_\_\_\_\_

### SHIPPING INSTRUCTIONS

SHIP TO:	FEDEX _____ ACCT #: _____
ADDRESS:	RECIPIENT _____ THIRD PARTY _____
ADDRESS 2:	<p><b>CERTIFICATES WILL NOT BE DELIVERED WITHOUT A SHIPPING ACCOUNT NUMBER OR CREDIT CARD NUMBER. IF PAYING BY CREDIT CARD, PLEASE MAKE SURE TO FILL OUT AND SUBMIT OUR "CREDIT CARD CHARGE VERIFICATION FORM" ALONG WITH THIS L.O.I. THE FORM IS AVAILABLE ON OUR WEBSITE AT TRANSHARE.COM</b></p>
CITY: _____ STATE/PROVINCE: _____ ZIP: _____	
COUNTRY: _____ PHONE: _____	
SPECIAL SHIPPING INSTRUCTIONS:	



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ADDITIONAL SHAREHOLDER ADDENDUM  
 Transfer

SHAREHOLDER # \_\_\_\_\_ OF \_\_\_\_\_

**PLEASE ATTACH ALL ADDENDUMS TO TRANSFER REQUEST**

**REGISTRATION OF NEW CERTIFICATE(S)**

NAME(S):				
SOCIAL SECURITY NUMBER: _____ - _____ - _____		-OR- TAX ID NUMBER: _____ - _____		
INDIVIDUAL	CORP	PARTNERSHIP	LLC	TENANTS IN COMMON
				TENANTS BY THE ENTIRETIES
				JOINT TENANTS
				JTWROS
ADDRESS:		CITY:	STATE/PROV.:	ZIP: COUNTRY:
PHONE:		FAX:	E-MAIL:	
_____ CERTIFICATES X _____	SHARES = _____	<b>TOTAL SHARES ISSUED</b>		
_____ CERTIFICATES X _____	SHARES = _____	_____		

**SHIPPING INSTRUCTIONS**

SHIP TO:	FEDEX _____ ACCT #: _____
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CITY: STATE/PROVINCE: ZIP:	<b>CERTIFICATES WILL NOT BE DELIVERED WITHOUT A SHIPPING ACCOUNT NUMBER OR CREDIT CARD NUMBER. IF PAYING BY CREDIT CARD, PLEASE MAKE SURE TO FILL OUT AND SUBMIT OUR "CREDIT CARD CHARGE VERIFICATION FORM" ALONG WITH THIS L.O.I. THE FORM IS AVAILABLE ON OUR WEBSITE AT TRANSHARE.COM</b>
COUNTRY: PHONE:	
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