LOST BOND INSTRUCTIONS FOR STATE OF ISRAEL BONDS

These instructions can be used by holders of any lost bonds.

- •Lost bonds with a total combined value of \$25,000 or less are subject to a straight \$25 replacement / redemption fee (per account) (check(s) are to be made payable to <u>Computershare</u>).
- •Bonds with a combined value at \$25,001 or more are subject to a \$100 replacement/redemption fee (per account) check(s) are to be made payable to Computershare.

Along with your check for the fee made payable to <u>COMPUTERSHARE</u>, the following documents are required to process your request:

- A cover letter stating the bond(s) was/were lost;
- The <u>Government of Israel Affidavit</u>, signed by all holders of the bond(s) with their signature(s) notarized:
- A <u>W-9 form</u> signed by the recipient of the funds;
- If reinvesting: a <u>Letter of Transmittal</u> and <u>Investment Form</u> (and <u>CIF form</u> if needed). For additional
 funds being added to a reinvestment of a lost bond checks should be made payable to <u>State of Israel</u>.

All of the above forms can be found on our website at http://www.israelbonds.com/israelbonds/forms.aspx

<u>Please note</u>: For bonds registered in the name(s) of a deceased holder, additional forms are required to be presented along with the above. Please contact either of the numbers below for assistance with decedent items:

COMPUTERSHARE, fiscal agent for State of Israel Bonds: (866) 764-3425

ISRAEL BONDS CUSTOMER SERVICE: (888) 519-4111

Visit our website at www.israelbonds.com

Make and keep copies of all documents for your own records until your transaction is completed. All material should be mailed via certified mail or some other form of confirmed delivery, at your option and risk, to:

Redemptions & Replacements

COMPUTERSHARE ATTN: ISRAEL BONDS 250 ROYALL STREET CANTON, MA 02021

Reinvestments

DEVELOPMENT CORP FOR ISRAEL CUSTOMER SERVICE 641 LEXINGTON AVENUE, 9TH FLOOR NEW YORK, NY 10022

For assistance completing forms or to correct submitted forms, email <u>customer..service@israelbonds.com</u> or call 1-888-519-4111.

For questions about **redemptions**, **bond holdings**, **bond transfers**, **lost bonds**, **address changes**, **W9s**, **estate issues**, etc., go to <u>www.israelbondsdirect.com</u> or call **Computershare** at (866) 764-3425. Visit us on the web at <u>www.israelbonds.com</u>. Member FINRA



GOVERNMENT OF ISRAEL MINISTRY OF FINANCE AFFIDAVIT OF LOSS AND INDEMNITY

State of			
County of	}		
I/We,		, hereby affirm(s) and c	agree(s) as follows:
1. The undersigned is/are the legal and	beneficial owner(s) or is/are a	cting in a representative or fiduc	iary capacity with respect to a
Government of Israel Bond(s) in the total			
wit	h date(s) of issue		_ and maturing date(s) of
	(the "Original Bon	nd(s)"), Holder Account Number	<u> </u>
2. The original Bond(s) have/has been	lost, stolen or destroyed.		
3. If the Original Bond(s) were/was los unable to locate it/them.	t or stolen, the undersigned has	diligently searched for the Original	inal Bond(s) but have been
4. The Original Bond(s) were/was not e relating to the Original Bond(s).	endorsed for transfer, and the u	ndersigned has not executed any	Bond(s) or similar power
5. The undersigned has not sold, transf person or entity.	erred or disposed of the Origina	al Bond(s) or any interest, right,	title or claim therein to any
6. The undersigned makes this affidavit substitution for the Original Bonds(s) of has matured.			
7. If the undersigned finds the Original Corporation for Israel ("DCI"), Israel . Trust Company N.A. or Computershare forward Bond(s) to the CPU for cancell	Bonds International ("IBI"), or Trust Company of Canada (tog	· Canada Israel Securities Ltd. ('	'CISL'') or Computershare
8. The undersigned hereby agrees to in and assigns them harmless, and to reim or their successors and assigns may sus new Bond(s) or from payment to the und	burse the Government of Israel, tain by any other person or enti	, DCI, IBI, CISL and CPU for an ity arising from the Original Bon	y loss, damage or expense they
_			Registered Owner(s)
Subscribed and sworn to (or affirmed) b	pefore me,	, Notary Public, on this	day of,
20, by	who proved to	o me on the basis of satisfactory	evidence to be the person(s)
who appeared before me.			
Witness my hand and official seal.			
	(1	Seal) My Commission	Notary Public Signature on Expires: