

DIRECT DEPOSIT AUTHORIZATION FORM

DIRECT DEPOSIT AUTHORIZATION

I (We) hereby authorize BNY Mellon Shareowner Services, as disbursing agent for the Company, to initiate dividend credit entries to my (our) account; or if necessary, debit entries or adjustments for any credit entries in error. This authority is to remain in effect until my (our) written authorization to terminate direct deposit is received, in time to afford BNY Mellon Shareowner Services reasonable opportunity to act on it, or until the Company or BNY Mellon Shareowner Services terminates this service.

IMPORTANT: All information is required.

1. Bank Account Number: _____

2. Account Type (circle one): Checking Savings

3. 9-digit Bank Routing Number: _____

4. Company Name: _____

5. Shareowner Name: _____

6. Investor Identification Number (Investor ID): _____

7. Bank/Financial Institution:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

8. The endorser hereby agrees to the terms of the Direct Deposit Authorization statement printed above.

Signature

Date

Signature If Held Jointly

Date

SEE REVERSE SIDE FOR IMPORTANT INSTRUCTIONS

Please sign exactly as name appears on your stock certificate or statement. When joint tenants hold shares, both should sign, when signing as attorney, executor, administrator, trustee, or ownership, please give full title as such. If a corporation, please sign in full corporate name by president or other authorized officer. If a partnership, please sign partnership name by authorized person.

