The Depository Trust Company IMPORTANT

B#: 9982-06

DATE: July 27, 2006

TO: All Participants

CATEGORY: Participant Services

FROM: DTC Inventory Management

ATTENTION: Managing Partner/Officer; Cashier; Operations Manager

SUBJECT: Frozen Letter Movement Request Form Revision

In an effort to improve the "Frozen Letter" Movement process, starting **August 7, 2006**, a new "Frozen Letter" Request Form will be implemented (see attached Exhibit 1). Changes to the form include:

- a processing procedure that will assist you in preparing the form
- a new fax number (212-855-5030) to send the form to DTC's Inventory Management department for processing
- a new Frozen Letter Hotline (212-855-5666) for inquiries

The Voluntary Offering - VOI Position Movement Request Form was not changed (see attached Exhibit 2).

Additional copies of these forms can be found on DTC's website at www.dtc.org. Questions regarding this notice may be directed to your Relationship Manager.



THE DEPOSITORY TRUST COMPANY

"Frozen Letter" Request Procedures

Exhibit 1

The "Frozen Letter Request" process enables participants to deliver on a free of payment basis "frozen" security positions from one DTC Participant account to another in limited circumstances. Participants requesting a "frozen" position movement indemnify DTC from any harm or loss for the action taken.

Please follow the procedure listed below:

Delivering Participant:

- 1. Verify the issue is chilled for DO's using the PTS function GWIZ
- 2. Must have free position to cover the move using the PTS function POS.
- Check PTS function RIPS for corporate actions related chills i.e. "frozen letters will be accepted".
- 4. Complete the form by entering:
 - Delivering Participant name, Delivering Participant number, Receiving Participant name, Receiving Participant number, CUSIP number, Issue name, Quantity of shares/bonds, Authorized Deliverer signature, Authorized Deliverer name, telephone number, e-mail address and fax number.
- Check-off if the transaction pertains to an account transfer (ACAT). Please note that both parties certify that the request is being made as part of an account transfer and for no other purpose.
- 6. Check-off if the transaction pertains to a Redemption, is there a Call with interest or without interest.
- 7. Check-off if the transaction pertains to any other reason. Please indicate reason.
- 8. Include a legible Medallion stamp. (Note, if green ink is used please make a photocopy of the letter and fax the photocopy to the Receiving Participant.)
- 9. Fax letter to Receiving Participant.

Receiving Participant:

- 10. Enter Authorized Receiver signature.
- 11. Print Authorized Receiver name, telephone number, e-mail address and fax number.
- 12. Include a legible Medallion stamp. (Note, if green ink is used please make a photocopy of the letter and fax the photocopy to DTC.)
- 13. Fax the completed letter to **DTC at 1-212-855-5030**

Both the Delivering and Receiving Participants are responsible for filling out the form completely and with legible Medallion stamps. If the form is not complete or the Medallion stamps are illegible, <u>Delivering</u>, <u>Receiving or both Participants</u> will be subject to a reject fee. Completed forms will be processed within 24 hour from the time of receipt.



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"Frozen Letter" Request Attention DTC Inventory Management Department

Fax Number: 1-212-855-5030

The undersigned parties	nereby request that shar	res/bonds listed below are to	o be delivered
free from the account of_			
Delivering Participant name			number.
to the account of			/, and
hereby, jointly and sever	ally, agree to indemnify , including without lim	DTC and hold it harmless itation attorneys' fees and c	from any claims,
USIP	Issue Name		Quantity
	Check	applicable boxes:	
1. Account Transf	er (ACAT)		
2. Redemption [Called with Interest	Called witho	ut Interest
3.			
NOTE : For Account Transfer of a custo		d parties certify that this "froother purpose.	ozen letter" request is
X:Authorized Delivered	· Signatura	X:Authorized P	eceiver Signature
Print Name		Print Name	
Phone #		Phone #	
E-Mail		E-Mail	
Fax #		Fax #	
Medallion Stamp		Medallion Stamp	

Exhibit 2



THE DEPOSITORY TRUST COMPANY

VOI Position Movement Request

Attention DTC Reorganization Voluntary Department

Phone Number 212 855 – 5292	VOI Number
Fax Number 212 855 – 5278	Target CUSIP
* Please be advised only total posit accepted.	on can be moved. Partial position movements can not be
The undersigned parties hereby req	lest that shares/bonds of
	Quantity
Issue name ,	be delivered free from the account Contra CUSIP
	to the account of
Delivering Participant / number	to the account of Receiving Participant / number
	and hereby, jointly a hereby, jointly a
Delivering Participant / number	Receiving Participant / number
taking the action requested above. Check box if applicable Account Transfer	on attorneys' fees and costs, that may arise as a result of D
Authorized Deliverer	Authorized Receiver
Print Name	Print Name
Phone #	Phone #
Fax #	Fax #
Medallion Stamp	Medallion Stamp