TRUST—FIDELITY ACCOUNT® APPLICATION

It's easy to fill out this application. Just complete all relevant sections, sign in ink, and return to Fidelity in the postage-paid envelope or mail to: Fidelity Investments, P.O. Box 770001, Cincinnati, OH 45277-0036.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money-laundering activities, federal law requires Fidelity to verify your identity by obtaining your name, date of birth, address, and a government-issued identification number before opening your account. In certain circumstances, Fidelity may obtain and verify this information with respect to any person(s) authorized to effect transactions in an account. For certain entities, such as trusts, estates, corporations, partnerships, or other organizations, identifying documentation is also required. Your account may be restricted and/or closed if Fidelity cannot verify this information. Fidelity will not be responsible for any losses or damages (including but not limited to lost opportunities) resulting from any failure to provide this information, or from any restriction placed upon, or closing of, your account.

1 ACCOUNT SETUP

Please select the type of account you would like to open, complete the account owner's information and attach copies of those pages of the trust which provide the full name of the trust and all signatures. **All fields in bold are required for opening an account.**

Note: Do not use this application to establish a retirement account or an Omnibus (pooled) account at Fidelity. Contact a Fidelity representative at 1-800-FIDELITY for further instructions.

2 FINANCIAL PROFILE

We are required by the NASD and other industry regulators to obtain the information in this section.

3 FUNDING YOUR ACCOUNT

A minimum deposit of \$2,500 is required to open your account. You may pay by check, certificate, or by transferring assets (from your bank or another account). Simply check the appropriate box(es) to fund your account.

(4) ACCOUNT FEATURES

Your account has a wide range of features to help you manage your finances — from making automatic investments to checkwriting, debit card, and bill payment services. More information on each of these services is included in this section.

5 SIGNATURE

Please be sure to sign your application in ink. We cannot process your application without your signature.

QUESTIONS?

For more information

1-800-FIDELITY or Fidelity.com



Important

In order to avoid any processing delays, please read.

Due to the passage of the USA PATRIOT ACT, Trust customers must:

- Complete the enclosed application
- Attach copies of the pages of the original or amended trust agreement that contains the following:
 - Full trust name
 - Identity of trustees and all grantors
 - If in effect, successor trustees
 - Trustee signatures

Generally this information can be found on the first and last pages of the trust document.

In order to satisfy USA PATRIOT ACT requirements, it is Fidelity's policy not to accept the following documents in lieu of the original trust agreement:

- Certificate of Trusts
- Memorandum of Trusts
- Affidavit of Trusts



1 ACCOUNT SETUP

U.S. driver's license number (if available) ___

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	ng and attach copies of those pages of the trust which provide the full name of a store only the portions of the trust containing this requested information.
Full legal name of trust	
For the benefit of	
Date of trust (month/day/year)	
Social Security number	or Trust Taxpayer ID number
Permanent address (no P.O. boxes)	City State Zip
Mailing address	City State Zip
State/Country of organization	
GOVERNMENT ID (FOREIGN TRUSTS ONLY)	dentification document must have a reference number. Please attach a photocopy.
Government issued identification number _	
Type of document	
Country of issuance	
in Account Setup and the signature of each Tr	rate piece of paper with their names and required information from Trustee section astee.
Full legal name	
riist Name	Middle Name Last Name
Email address	
Email address	Date of birth (month/day/year)
Social Security number Permanent address	Date of birth (month/day/year)
Email address Social Security number	Date of birth (month/day/year) Or Taxpayer ID number City State Zip Day Day Ext.
Social Security number Permanent address (no P.O. boxes) Mailing address (if different from above) Street	Date of birth (month/day/year) or Taxpayer ID number City State Zip City State Zip
Social Security number Permanent address (no P.O. boxes) Mailing address (if different from above) Phone numbers Evening Countries of citizenship U.S. Other(s) GOVERNMENT ID (FOREIGN CITIZENS ONLY)	Date of birth (month/day/year) Or Taxpayer ID number City State Zip Day Country of
Email address Social Security number Permanent address (no P.O. boxes) Mailing address (if different from above) Phone numbers Evening Countries of citizenship U.S. Other(s)	Date of birth (month/day/year) or Taxpayer ID number City State Zip City State Zip Country of tax residence U.S. Other
Social Security number Permanent address (no P.O. boxes) Mailing address (if different from above) Phone numbers Evening Countries of citizenship U.S. Other(s) GOVERNMENT ID (FOREIGN CITIZENS ONLY)	Date of birth (month/day/year) Or Taxpayer ID number City State Zip City State Zip Country of tax residence U.S. Other Identification document must have a reference number and photo. Please attach a photocopy.
Social Security number Permanent address	Date of birth (month/day/year) Or Taxpayer ID number City State Zip City State Zip Country of tax residence U.S. Other Identification document must have a reference number and photo. Please attach a photocopy. State/Province Country Non-permanent resident Non-resident
Social Security number Permanent address (no P.O. boxes) Mailing address (if different from above) Phone numbers Evening Countries of citizenship U.S. Other(s) GOVERNMENT ID (FOREIGN CITIZENS ONLY) Place of birth City Immigration status Permanent resident	Date of birth (month/day/year) Or Taxpayer ID number City State Zip City State Zip Country of tax residence U.S. Other Identification document must have a reference number and photo. Please attach a photocopy. State/Province Country Non-permanent resident Non-resident Non-resident
Social Security number Permanent address (no P.O. boxes) Mailing address (if different from above) Phone numbers Evening (Total Countries of citizenship) GOVERNMENT ID (FOREIGN CITIZENS ONLY) Place of birth (City) Immigration status Permanent resident Check which type of document you are pro-	Date of birth (month/day/year) Or Taxpayer ID number City State Zip City State Zip Country of tax residence U.S. Other Identification document must have a reference number and photo. Please attach a photocopy. State/Province Country Non-permanent resident Non-resident Non-resident
Social Security number Permanent address (no P.O. boxes) Mailing address (if different from above) Phone numbers Evening Countries of citizenship U.S. Other(s) GOVERNMENT ID (FOREIGN CITIZENS ONLY) Place of birth City Immigration status Permanent resident Check which type of document you are pro-	Date of birth (month/day/year) Or Taxpayer ID number City State Zip Country of tax residence U.S. Other Identification document must have a reference number and photo. Please attach a photocopy. State/Province Country Non-permanent resident Non-resident Non-resident Passport with U.S. visa

1.815168.100 011990001

_ State of issuance

1 ACCOUNT SETUP (CO	NTINUED)				
TRUSTEE 1 (CONTINUED)					
Employment status	t employed Retired		1 1 1 1	· ·	
Employer's name and address Name	Street	Occupation (if retired or not e			
AFFILIATIONS Are you affiliated with or ex	mployed by a stock exch	ange or member firm of	City an exchange or th	State ne NASD, a	^{Zip} a municipal
securities broker-dealer, or No Yes If you have answered "yes," your employer's company name and address abo account approval letter is not required for Fidelit	you must include a letter ve. Failure to include an				
Are you a "control person" or "affiliate" of a pullimited to, 10% shareholders, policy-making e	xecutives, and members		rs.		ecessarily
TRUSTEE 2					
Full legal name First Name	Middle Name	Last Nam	ie		
Email address	Date of	birth (month/day/yea			
Social Security number		kpayer ID number]		
Permanent address (no P.O. boxes)	Cit	y	State	Zip	
Mailing address	Cit	y	State	Zip	
Phone numbers Evening				Ext.	
Countries of citizenship U.S. Other(s)	Cou	ntry of U.S.	Other		
GOVERNMENT ID (FOREIGN CITIZENS ONLY)	Identification document m	ust have a reference number	and photo. <u>Please a</u>	ittach a pho	tocopy.
Place of birth City	State/Province		Country		
Immigration status Permanent resident		sident	nt		
Check which type of document you are pro	_				
U.S. driver's license INS permanent	resident alien card	Passport with U.S. visa			
Passport without U.S. visa*	*Bank name required	*Account number requir	red		
Foreign national identity document*	*Bank address required	*Phone number required	l		
Document number and country of issuance	(Number from the document ch	ecked above)			
U.S. driver's license number (if available)			State	e of issua	nce
Employment status Employed No	t employed 🔲 Retired	Occupation (if retired or not e	mploved indicate sou	rce of income)
Employer's name and address ${Name}$					
AFFILIATIONS Are you affiliated with or ex	Street	ange or member firm of	City an exchange or th	State	Zip a municinal
securities broker-dealer, or No Yes If you have answered "yes," your employer's company name and address abo account approval letter is not required for Fidelit	by Fidelity? you must include a letter ve. Failure to include an	of account approval from	n your Compliand	ce Officer a	and indicate
Are you a "control person" or "affiliate" of a pullimited to, 10% shareholders, policy-making e	xecutives, and members	of the Board of Director		ut is not n	ecessarily
☐ No ☐ Yes Trading symbol ☐ ☐ ☐	∐∐∐ Company				

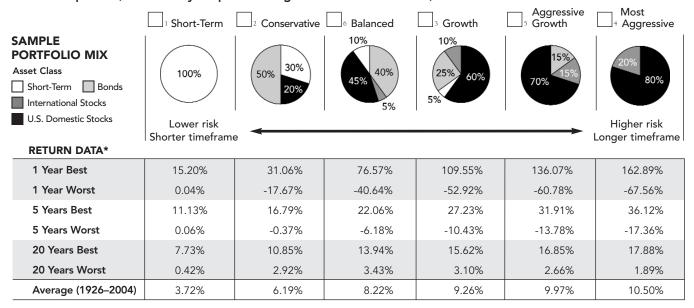


FINANCIAL PROFILE (REQUIRED)

INVESTMENT OBJECTIVE FOR THE TRUST

You should choose your investments based on your objectives, time frame, and tolerance for market fluctuation. From short-term liquid investments that seek to preserve capital (accepting the lowest returns in exchange for stability) to longer-term investments that seek maximum growth (but can tolerate very wide fluctuations in market values), you can choose an approach that's best for you. Simply check the box below that most closely matches your investment objective.

Check one profile (Determine your profile using the information below.)



Short-Term You seek to preserve your capital and can accept the lowest returns in exchange for price stability.

Conservative You seek to minimize fluctuations in market values by taking an income-oriented approach with some potential for capital appreciation (minimum required for writing covered call options).

Balanced You seek the potential for capital appreciation and some growth and can withstand moderate fluctuations in market value.

Growth You have a preference for growth and can withstand significant fluctuations in market value.

Aggressive Growth You seek aggressive growth and can tolerate wide fluctuations in market values, especially over the short term.

Most Aggressive You seek very aggressive growth and can tolerate very wide fluctuations in market values, especially over the short term (required for options strategies other than writing covered call options).

Check one box from each column. (Please provide financial information for the Trust.)

ANNUAL INCOME (from all sources)	ESTIMATED NET WORTH (excluding residence)	ESTIMATED LIQUID NET WORTH	FEDERAL TAX BRACKET
1 Under \$20,000 2 \$20,000-\$50,000 3 \$50,001-\$100,000 4 Over \$100,000	1 Under \$30,000 1 \$30,000-\$50,000 2 \$50,001-\$100,000 3 \$100,001-\$500,000 4 Over \$500,000	Under \$15,000 1 \$15,000-\$50,000 3 \$50,001-\$100,000 3 \$100,001-\$500,000 4 Over \$500,000	☐ 1 ≤15% ☐ 2 25% ☐ 3 ≥28%

^{*}Return data for Domestic Stocks, Bonds, and Short-Term asset classes range over a period from 1926–2004. Return data for the International Stock asset class range over the period from 1970–2004. Domestic Stocks are represented by the S&P 500, bonds are represented by the U.S. Intermediate Term Government Bonds, Short-Term assets are based on the 30-day U.S. Treasury bill, and International Stocks are represented by the MS EAFE Index. This is for illustrative purposes only and is not indicative of any investment. Past performance is no guarantee of future results.

3 FUNDING YOUR ACCOUNT

The minimum initial deposit required to open this account is \$2,500 in cash and/or eligible securities. Orders placed in a new account require 100% of any initial trade's value. You may fund your Fidelity Account in any of the five ways listed below:

BY CHECK

I have enclosed a check for \$	made payable to National Financial Services LLC, to be deposited
to my core Fidelity Account.	

3 FUNDING YOUR ACCOUNT (CON			
TRANSFER FROM OTHER FIRM	TRANSFER FROM EXISTING FIDELITY ACCOUNT		
☐ I am transferring money or securities from another firm and have included a Transfer of Assets form. (see attached form)	☐ I am transferring all shares or positions from my nonretirement Fidelity Account(s) and/or Fidelity Fund(s) Account:		
\$			
BY WIRE	DEPOSITING CERTIFICATES		
I am wiring funds to Fidelity from my bank or brokerage firm. Contact a Fidelity Representative for further instructions.	I am depositing appropriately endorsed certificates. (Endorse the back of each certificate as		
\$	registered and write "National Financial Services LLC" on the line between "appoint" and "attorney.")		
CORE ACCOUNT (CHOOSE ONE)			
All income from securities (dividends, capital gains, or sale proceed from mutual funds are reinvested in the originating fund. You can or online at Fidelity.com.	elect to change your distributions by phone at 1-800-FIDELITY,		
Select a core account option where all of your cash is held and tra	ansactions are processed (choose one).		
Fidelity state municipal money market funds seek income from income tax.	om investments that is free from both federal and state or city		
Arizona Connecticut Massacl	husetts New Jersey Ohio		
☐ California ☐ Florida ☐ Michiga:	n New York Pennsylvania		
Fidelity federal municipal money market funds seek income	from investments that is free from federal income tax.		
Fidelity Municipal Money Market Fund			
the Federal Alternative Minimum Tax.)	rmally invest in municipal securities whose interest is subject to		
Fidelity taxable interest-bearing cash account is intended for on assets. (This account will be selected if no information is supp Taxable Cash Account			
PURCHASE FUNDS			
Please purchase a mutual fund(s) as indicated below. I understand and after my check has been deposited in my core account. I have			
Fund Family	Fund Name		
Fund Symbol Amount* \$	(Generally \$2,500 minimum)		
*Fidelity fund minimums are generally \$2,500. Higher minimums apply for Fidelity index fund. For non-Fidelity funds, see prospectus for minimums.	s, municipal bond funds, and some money market funds; see prospectus for more information.		
4 ACCOUNT FEATURES			
OVERDRAFT PROTECTION AND MARGIN BORE	ROWING ¹		
This borrowing feature allows you to use your eligible individual se the purchase of additional securities, as a low-cost loan alternative			
Check here to be considered for overdraft protection and man	rgin borrowing		

¹ Subject to Fidelity's approval. May require a review of your credit history. Margin borrowing involves additional risks and is not suitable for all investors. By checking the box and signing this application, you acknowledge that you have read the margin agreement section of the Customer Agreement and agree to its terms. If applying for margin, Sections 1 and 2 must be completed in their entirety. Not available on UGMA/UTMA, Estate, or other non-Trust Fiduciary accounts.

4 ACCOUN

ACCOUNT FEATURES (CONTINUED)

ACTIVE TRADER FEATURES²

Check below to be considered for our Active Trader Services and disa rolling 12-month period at Fidelity.	scounted commissions if you plan on trading at least 36 times over
I plan to trade: \square 36–71 times \square 72–119 times \square 12	.0(+) times
a rolling 12-month period at Fidelity.	delity Account. For more information on these features please visit
I would like to stop my regular investments in the fund(s) described above on (Month/Day/Year) Please attach a voided check from your bank to this application to provide routing information. To Move Money between Your Fidelity Account and	the checkwriting signature card located on the last page of this booklet and return with this application. Fidelity BillPay® ⁴ This service allows you to pay bills online directly from your Fidelity Account. Yes, I wish to establish BillPay. I understand that a monthly fee may be assessed for some customers. Fidelity BillPay is not available on Custodial UGMA/UTMA or business accounts. Fidelity Visa® Gold Check Card ⁵
Other Accounts: Fidelity Money Line® This service allows you to electronically transfer money between your bank and Fidelity accounts without paying a fee to Fidelity. Your bank may charge a fee. Yes, I wish to establish Money Line.	This card is a debit card that can be used to withdraw cash at ATMs or to make purchases at locations wherever Visa® is accepted. Each transaction is debited from the core account position of your brokerage account daily. Yes, I wish to be considered for the Fidelity Visa Gold Check Card, issued by PNC Bank Delaware. Yes, I would like to receive an additional card for joint owner.

² Active Trader Services requires Fidelity's approval and, if approved, eligibility will be reviewed periodically after enrollment. See the commission schedule in the Supplemental Information booklet for details.

³ All checks written will be reported on your Fidelity Account statement. Fidelity must have the signature card on file to establish this service.

^{*}Schedule bills to be paid electronically from your Fidelity Account through Fidelity.com. The monthly fee is \$6.95 and is waived for BillPay customers who trade 36+ times in a rolling 12-month period or maintain \$100,000 or more in certain retail assets at Fidelity. See the Fidelity BillPay Service Agreement for complete details or, for more information regarding eligible household accounts, see the Household Relationship form available at Fidelity. This feature is available to nonretirement accounts with individual, joint, estate, and trust registrations.

⁵ (\$5,000 account minimum) The Fidelity Visa® Gold Check Card is issued by PNC Bank, Delaware, with no annual fee. By checking the box, you authorize PNC Bank, Delaware to check your employment and credit history and to answer questions about their payment experience with you. You have read and agree to the important disclosures pertaining to this request contained in the accompanying Fidelity Customer Agreement. All transactions are deducted from your Fidelity core account daily. The Visa Gold Check Card is available to nonretirement accounts with individual, joint, or trust registrations only and cannot be issued to Custodial UGMA/UTMA.



SIGNATURE (ALL OWNERS MUST SIGN THE APPLICATION)

On behalf of the Trust, I hereby request Fidelity Brokerage Services LLC and National Financial Services LLC (collectively "Fidelity" or "you") to open a Fidelity Account in the name of the Trust listed as account owner on this application. The Trustees hereby certify the following:

- Fidelity has the authority to accept orders and other instructions relative to the Trust accounts identified herein from those individuals listed in Section 2. The trustee(s) may execute any documents on behalf of the Trust that you may require. By signing this form, the Trustee(s) hereby certify(ies) that you are authorized to follow the instructions of any Trustee and to deliver funds, securities, or any other assets in the Fidelity Account to any Trustee or on any Trustee's instructions, including delivering assets to a Trustee personally. Fidelity, in its sole discretion and for its sole protection, may require the written consent of any or all Trustees prior to acting upon the instructions of any Trustee.
- There are no other Trustee(s) of the Trust other than those listed in Section 1 or identified on a separate piece of paper attached to this application. The attached pages of the trust document are true copies of the valid legal document currently in effect.
- Should only one person execute this agreement, it shall be a representation that the signer is the sole Trustee. Where applicable, plural references in this certification shall be deemed singular.
- We, the Trustees, have the power under the Trust and applicable law to enter into the transactions and issue the instructions that we make in this account. Such power may include, without limitation, the authority to buy, sell (including short sales), exchange, convert, tender, redeem and withdraw assets (including delivery of securities to and from the account), and to trade securities on margin or otherwise (including the purchase and/or sale of option contracts) for and at the risk of the Trust. We understand that all orders and transactions will be governed by the terms and conditions of all other account agreements applicable to this account.
- We, the Trustees, jointly and severally, indemnify you and hold you harmless from any claim, loss, expense, or other liability for effecting any transactions, and acting upon any instructions given by the Trustees. We, the Trustees, certify that any and all transactions effected and instructions given on this account will be in full compliance with the Trust.
- . We, the Trustees, agree to inform you in writing of any change in the composition of the Trustees, or any other event that could alter the certifications made above.
- We, the Trustees, agree that any information we give to Fidelity on this account will be subject to verification, and we authorize you to obtain a credit report about me (any of us) individually at any time. Upon written request, Fidelity will provide the name and address of the credit reporting agency used.

I hereby request Fidelity Brokerage Services LLC and National Financial Services LLC (collectively "Fidelity") to open a Fidelity Account in the name(s) listed as account owner(s) on this application.

- Lacknowledge that I have been furnished with a copy of the Fidelity Account Customer Agreement and that I have read, understood, and agree to be bound by its terms and conditions as they are currently in effect and as they may be amended in the future. I am at least 18 years of age and of full legal age in the state in which I reside. I understand that, upon issuer's request in accordance with applicable rules and regulations, Fidelity will supply my name to issuers of any securities held in my account so I might receive any important information regarding them, unless I notify Fidelity.
- I understand that the Customer Agreement and its enforcement shall be governed by the laws of the Commonwealth of Massachusetts. It shall cover individually and collectively all accounts which I may open or reopen with Fidelity. It shall inure to the benefit of Fidelity's successors and assigns, whether by merger, consolidation, or otherwise. Fidelity may transfer my account to your successors and assigns, and this Agreement shall be binding upon my heirs, executors, administrators, successors, and assigns.
- I have received and read either the Prospectus or the Profile Prospectus for Fidelity Municipal Money Market Fund. If I received the Profile Prospectus, I understand that I may purchase shares of Fidelity Municipal Money Market Fund now or request to receive and review the Fund's full prospectus before I make a decision to invest in Fidelity Municipal Money Market Fund.
- I hereby authorize Fidelity, upon receiving instructions from me, to make payments of amounts representing redemptions by me or distributions payable to me by initiating credit or debit entries to the bank account (Bank) indicated on the attached 'voided' check. I authorize and request the Bank to accept such entries from Fidelity, and to credit or debit, as indicated, my account at the Bank in accordance with these entries. I understand that Fidelity will not be liable for any loss, expense, or cost arising out of my instructions provided that it institutes reasonable procedures to prevent unauthorized transactions. I acknowledge that this authorization may only be revoked by providing written notice of revocation to Fidelity, in such time and manner as afford Fidelity and the Bank a reasonable opportunity to act upon it.
- I certify that this account is not a Pooled or Omnibus Account. A Pooled or Omnibus Account is a single account that pools the holdings of more than one beneficial owner, whose identities are not disclosed to Fidelity, in which the beneficial owners have the ability to affect transactions, and for which sub-accounting is performed by the omnibus account holder or a third party.
- If I am a U.S. person (including a U.S. resident alien), I certify under penalties of perjury that: (1) I am a U.S. person (including a U.S. resident alien) and the Social Security or Taxpayer Identification Number provided is correct (or that I am waiting for a number to be issued to me); and (2) I am not subject to backup withholding because: (a) I am exempt from backup withholding; or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding for failure to report all dividend and interest income; or (c) I have been notified by the IRS that I am no longer subject to backup withholding. (Cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.) If I am not a U.S. person (including a U.S. resident alien), I am submitting the applicable Form W-8 with this form to certify my foreign status and, if applicable, claim tax treaty benefits.
- The following clause referring to lending of securities applies only to those accounts eligible and approved for margin. I understand that UGMA/UTMA, estate, and other non-trust fiduciary accounts cannot use margin. I hereby authorize Fidelity to lend, hypothecate, or rehypothecate, separately, or with the property of others, either to yourselves or to others, any property you may be carrying for me on margin. This authorization applies to all my accounts you carry and shall remain in force until you receive written notice of revocation at your main office in Boston, MA.

The Internal Revenue Service does not require yo document other than the certifications required to	ur consent to any provision of this o avoid backup withholding.	• This according of the Cu	 This account is governed by a predispute arbitration clause, which is located on the last page of the Customer Agreement. I acknowledge receipt of the predispute arbitration clause. 			
X		X				
SIGNATURE OF TRUSTEE I	Date (month, day	y, year) SIGNAT	URE OF TRUSTEE II	Date (month, day, year)		
Fidelity Investments is a registered trademark owner and other principal exchanges. Fidelity Investments	d by FMR Corp. Accounts are car. , P.O. Box 770001, Cincinnati, Ol	ried with our affiliate, Natio H 45277-0036.	onal Financial Services LLC, a mem	nber of the New York Stock Exchange		
Please tell us where you he	ard about Fidelity	's financial solu	itions:			
☐ Newspaper ☐ TV ☐ Ma	gazine 🗌 Radio 🗀	Friend/Referral	Direct Mail/Email	☐ Web ☐ Fidelity Branch		
FOR FIDELITY USE ONLY	Cash Margin	ATP Account #	Assigned			
Rep Name	Reg. Rep. Signature		Corp ID	Date		
Approving Manager's Signature	I	Date	Investor Center Number			
Photo ID Type	Expiration Date	Second Photo	ID Туре	Expiration Date		



Fidelity Transfer of Assets Form

Use this form to authorize the transfer of assets currently at another firm to your Fidelity Account® or Fidelity Funds account, or Fidelity retirement account. **COMPLETE ONE FORM FOR EACH ACCOUNT YOU ARE TRANSFERRING, AND INCLUDE A COPY OF YOUR MOST RECENT ACCOUNT STATEMENT FROM YOUR CURRENT FIRM.** Mail your completed transfer form and statement copy to Fidelity Investments, P.O. Box 770001, Cincinnati, OH 45277-0036. **Questions? Call 800-544-6666.**

account (i.e., IRA to IRA). If the registrations do not match, estable		
account application with this request. Your Fidelity Account Fidelity account number (if available)	Account Being Transferred Primary Social Security or Tax Identifica	,
Account Owner/Custodian/Trustee	Name of Firm currently holding your account	
Joint Owner/Minor/Name of Trust	Address of Firm	
Daytime Phone	Account Owner/Custodian/Trustee	
E-mail Address (if not currently on file)	Joint Owner/Name of Trust	
	Firm's Phone Number	
Account Type at Fidelity (check one) Single Joint Roth IRA Trust SEP IRA Corporate/Business SIMPLE IRA Qualified Plan* Other Non-Prototype Qualified Plan	☐ Joint ☐ Roth ☐ Trust ☐ SEP I ☐ Corporate/Business ☐ SIMP ☐ Custodial ☐ Quali	itional or Rollover IRA IRA
*Qualified Plan options offered under the Fidelity Retirement Plan include Pr		
☐ Transfer all assets to Fidelity (unless otherwise indicate ☐ Liquidate all assets in my account and send the prod ☐ Transfer only a portion of my account, as detailed b Description of Security(ies)	ceeds to Fidelity. elow (continue on a separate sheet if needed): Tra	er shares transferred in kind).¹ ansfer Sell Assets & nares¹ Transfer Cash
'If you do not instruct otherwise, Fidelity will default to this option for e accounts may only accept Fidelity Funds or cash transfers. B. Bank, Savings & Loans, Life Insurance, Annuity, or C Transfer cash only. All cash will be transferred unless Liquidate CD or annuity immediately and transfer cash Submit your request three weeks prior to maturity. Portfolio Advisory Services Clients Only: PAS accepted to the part of	redit Union Transfer ss you indicate a different amount to transfer h ash. I acknowledge that I may incur a penalty l sh. Maturity date is/	ere: \$for early liquidation.
3 OWNER AUTHORIZATION AND AGREEMEN	T TO TERMS	
Include a copy of your most recent statement for the account By signing below, I (we) acknowledge reading and agree to the teferring assets from an account being held in an individual's name such transferred assets may change. Consult your legal or tax adv	t being transferred to Fidelity with this form rms and conditions printed on the back of this to a Fidelity account with a joint registration, y isor regarding your personal situation.	document. If you are trans- your ownership rights in
OWNER/CUSTODIAN/TRUSTEE SIGNATURE Date	JOINT OWNER SIGNATURE (IF ANY PLAN ADMINISTRATOR/TRUSTEE	Y)/ Date
X		

3

OWNER AUTHORIZATION AND AGREEMENT TO TERMS continued

Signature Guarantee:

Verify with the firm from which you are transferring to see if a signature guarantee or other documentation is required.

Authorization & Agreement to Terms

To delivering firm: Unless otherwise indicated in the instructions above, transfer all assets in my account to National Financial Services LLC, or if to a Fidelity prototype retirement account, Fidelity Management Trust Company, c/o National Financial Services LLC. I understand that to the extent any assets in my securities account are not readily transferable, with or without penalties, such assets may not be transferred within the time frames required by New York Stock Exchange Rule 412 or similar rule of the National Association of Securities Dealers or other designated examining authority. Unless otherwise indicated in the instructions above, I authorize you to sell any nontransferable proprietary money market fund assets that are part of my account and transfer the resulting cash credit balance to the successor custodian. I understand that you will contact me with respect to the disposition of any other assets in my securities account that are not transferable. I authorize you to deduct any outstanding fees due you from the credit balance in my account. If my account does not contain a credit balance, or if the credit balance in the account is insufficient to satisfy any outstanding fees due you, I authorize you to liquidate the assets in my account to the extent necessary to satisfy that obligation. If certificates or other instruments in my account are in your physical possession, I instruct you to transfer them in good deliverable form, including affixing any necessary tax waivers, to enable the successor custodian to transfer them in its name for the purpose of sale, when and as directed by me. I understand that upon receiving a copy of this transfer instruction, you will cancel all open orders for my account on your books. I affirm that I have destroyed or returned to you credit/debit cards and/or unused checks issued to me in connection with my securities account. I understand that if I am transferring a SIMPLE-IRA from another custodian to Fidelity and I do not provide a Date of First Participation in a form and manner acceptable to the custodian, the date of the first participation will be the date contributions are first deposited to my SIMPLE-IRA at Fidelity by my employer.

For transfers to Fidelity prototype retirement accounts: I acknowledge that I have adopted a Fidelity IRA, Fidelity Roth IRA, Fidelity SIMPLE-IRA, or Fidelity Retirement Plan (Keogh/Self-Employed 401(k)) with Fidelity Management Trust Company as successor custodian/trustee, and I agree to transfer only those assets which can be held in such accounts, as described in the relevant Custodial Agreement or Plan Document. If I am over 70½, I attest that this transfer will not violate the required minimum distribution rules under Section 401(a)(9) of the Internal Revenue Code.

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Fidelity Management Trust Company (FMTC) accepts appointment as successor custodian/trustee for the retirement account referred to in Section 1 of this form. Transfer the account as instructed in Section 2 on a fiduciary-to-fiduciary basis. The new account name will be: National Financial Services LLC, agent for FMTC, the successor custodian/trustee for the account listed in Section 1.

Successor Custodian/Trustee Signature:	Date:

IMPORTANT INFORMATION:

- If transferring margin and/or options positions, you must have an approved Margin and/or Options application(s) with Fidelity.
- For Fidelity Funds accounts, all cash transfers will be invested in Fidelity Cash Reserves, a money market fund. For all other Fidelity accounts, cash will be invested in the respective core account.
- Do not use this form to convert an IRA to a Roth IRA, or for directly rolling over an employer-sponsored retirement plan, such as a 401(k) distribution. Visit us at **Fidelity.com** for the appropriate forms or call us at **800-544-6666**.
- Most securities can be transferred, such as stocks, bonds, mutual funds (if available through Fidelity), options, limited partnerships, and unit investment trusts. Generally money market funds must be liquidated and transferred as cash. If you own a fund that is not transferable, you may wish to sell the fund and transfer cash to Fidelity. Call Fidelity if you are unsure or have any questions.
- For Portfolio Advisory Services Clients Only Certain securities may not be held in Fidelity Portfolio Advisory Service (PAS account) and/or Fidelity Private Portfolio Service (PPS account). By signing this transfer request you are acknowledging having received and read the Fidelity Portfolio Advisory Service and/or Fidelity Private Portfolio Service Fundamentals regarding the disposition of assets and dividends and capital gains in your account. Call 800-544-3455 with any questions related to your account.
- Certain securities cannot be held in Fidelity brokerage prototype retirement accounts (IRAs and Keoghs/Self-Employed 401(k)s). Refer to the appropriate Fidelity IRA Custodial Agreement or Fidelity Retirement Plan (Keogh/Self-Employed 401(k)) document for more information. If transferring assets from your qualified retirement plan(s) to the Fidelity Retirement Plan, contact your tax advisor to determine if it is necessary to file Form 5310-A prior to the transfer.
- Allow additional time if transferring foreign securities or Limited Partnership units. Customers transferring Limited Partnership units will be
 assessed a fee of \$75 per Limited Partnership transferred. Call Fidelity at 800-544-6666 to verify the Limited Partnership can be held.
- Trades contingent upon the receipt of your transferred assets will not be honored by Fidelity. To place a trade once your assets are received, visit us online at **Fidelity.com** or call us at **800-544-6666**.

Recent tax law changes have generally increased your rollover options. However, we encourage you to consult your tax advisor before consolidating your retirement savings assets. Certain special tax treatments such as forward averaging and pre-1974 capital gain may not be available if you commingle IRA assets.

All trade and service marks appearing within are the property of FMR Corp.

• Most transfers take 3–5 weeks to complete. Check the status of your transfer online by logging on to your account at Fidelity.com/goto/toa.



FBS-TOAW-1104

Household Relationship Form

Customer Contact Information:

Name of Account Owner	
Social Security or Tax I.D. Number	
Name of Additional Account Owner	
Social Security or Tax I.D. Number	

Please continue

Use this form to consolidate accounts into a Household Relationship. You may also choose to have these accounts consolidated into one reporting statement mailed in a single envelope to your address. Complete Section 1 to define your Household Relationship, which may include any eligible accounts owned by you (and/or reported on Fidelity account statements) or your immediate family members at your address. You may qualify for an enhanced service program or for a better commission level on all of these accounts based on the assets and trading activity of the entire household. For a complete explanation of commission level eligibility, please refer to the most recent Commission and Fee Schedule. Fidelity may include other assets at its discretion. Complete Section 2 if you want to authorize Fidelity to send one consolidated statement for all of the accounts listed in Section 1.

Premium Services and Private Access clients: You and your immediate family members may include eligible accounts into a Household Relationship regardless of address. However, you and your family members may only receive consolidated statements for accounts at the same address.

Be sure to have all account owners sign Section 3. Return this form to Fidelity Investments, PO Box 770001, Cincinnati, OH 45277-0002. If you have any questions, please call us at 1-800-544-6666.

1 To C

TO CONSOLIDATE ACCOUNTS INTO A HOUSEHOLD RELATIONSHIP

Please list the account numbers you are requesting to consolidate for the purposes of your Household Relationship.

- Your Household Relationship automatically includes all accounts on the portfolio summary page of the periodic account statements sent to your address. If you do not wish to make any changes, then you do not need to fill out this form.
- Forming a Household Relationship will not affect your account structure or ownership in any way; it will just allow Fidelity to aggregate the assets and trades from multiple accounts to ensure you receive the best possible commission level on each account at that address. You may also qualify for a higher service level.
- Use this section to include any additional accounts owned by you <u>or</u> by other immediate family members who reside at the same address that you'd like to include in your Household Relationship.
- For privacy reasons, every owner of each account must sign in Section 3 to give Fidelity permission to include these accounts in the Household Relationship. The total assets and trading activity from these accounts will be used to determine the commission schedule for all accounts in the Household Relationship and will be available to all account owners in the Household Relationship. Each periodic account statement will only display the total assets and trading activity associated with that statement.
- For a list of eligible accounts that can be consolidated into a Household Relationship, please refer to the chart on the back of this form. Please write in the account number of any Fidelity Brokerage account(s) and the account number of any Fidelity Mutual Fund account(s) that you wish to consolidate. Account numbers are located on your statement(s).

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sored retirement plans (excluding Fidelity	r Fidelity 401(k), 403(b), 457 Plans (including y Non-Prototype plans) in your Household Rela ociated with your Social Security or Tax I.D. n	ationship. We will then automatically include
\Box Check this box if you wish to include ye	our Fidelity Retirement Reserves® Annuities	in your Household Relationship.
Account Numbers	Account Numbers	Account Numbers

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2 To Consolidate Statements at Your Address

To receive a consolidated statement for the eligible accounts listed in Section 1, provide an address below. If you do not complete this section, you will continue to receive multiple statements mailed to your address. Note: Premium Services and Private Access clients may only receive consolidated statements for accounts at the same address.

- If any account owner changes an address on any account on the consolidated statement, it will automatically update the address on all other accounts on the statement.
- New accounts you open will be included on your consolidated statement. (Social Security number and address must match.)
- Please note: Employer-sponsored retirement plans (excluding Fidelity Non-Prototype plans) are not eligible for consolidated statements, but are eligible for consolidation into a Household Relationship.

Note: If you would prefer to receive your
consolidated statement online, please log on to
www.Fidelity.com/goto/edelivery to suppress paper
statements. To suppress paper statements, all account
owners must sign up.

3

AUTHORIZATION & SIGNATURES

Every account owner for each account being consolidated into a Household Relationship and being consolidated onto one periodic account statement must sign below to authorize the above instructions. For any account where account ownership is registered to a trust or custodial account, you, as trustee or custodian, understand that you are responsible for complying with your legal responsibilities and fiduciary obligations and you, on behalf of the trust or custodial account, indemnify Fidelity Brokerage Services LLC and its affiliates ("Fidelity") and hold harmless Fidelity from any loss, claim, expense, or other liability for any instructions given to Fidelity in connection with account householding consolidation.

SIGNATURE OF OWNER/OWNERS	Date
X	
SIGNATURE OF OWNER/OWNERS	Date
X	
SIGNATURE OF OWNER/OWNERS	Date
X	
SIGNATURE OF OWNER/OWNERS	Date

The following chart lists the accounts that are eligible for consolidation into a Household Relationship:

Eligible accounts

The Fidelity Account®

- Trust
- Individual brokerage accounts
- · Joint brokerage accounts
- Custodial UGMA and UTMA accounts

Beneficiary Distribution Accounts

College Investing Accounts

• 529 College Savings Plans (DE, MA, NH)

Retirement Accounts

- · Traditional IRAs
- Roth IRAs
- Rollover IRAs
- SEP IRAs

 Fidelity Retirement Plan accounts (includes Keogh Profit Sharing, Money Purchase and Self-Employed 401(k) accounts)

Mutual Fund Accounts

GoalPlanner Accounts

Employee Stock Option Plan Accounts

Beneficiary and Transfer on Death Accounts

Private Access Accounts

401(k)! 403(b)! 457¹ or other Employersponsored retirement plans (excluding Fidelity Non-Prototype plans)

BrokerageLink Accounts

Fidelity Retirement Reserves Annuities®

SIMPLE-IRAs

Ineligible accounts

The Fidelity Account

- Business
- Estate
- Non-Trust Fiduciary

Charitable Gift Fund[™] Accounts

Fidelity Advisor Accounts

Pooled Income Fund Accounts

Defined Benefits Plans

Destiny Plan Accounts

- -

Non-Prototype Accounts

Fidelity Income Advantage® Annuities

¹This account type is ineligible for reporting on a consolidated statement.



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Checkwriting for Non-Retirement Business/Trust/Fiduciary Fidelity Accounts

Authorized Person

Authorized Person

	Customer Information:	
	Name of Business/Trust	Social Security or TIN
	Brokerage: or	
	Mutual Fund:Fund Name	Mutual Fund Account Number
	Evening Phone:	
	Daytime Phone:	Ext:
Use this form to add checkwriting to t Proprietorship/Conservator/Guardian, Club/Estate.		tions: Business/Trust/Partnerships/Sole orated Association/Investment
file with Fidelity is correct, as checkbo Fidelity.com .	ooks will be sent to your record addres	rd. Make sure the address you have on ss. To update your address, visit us at will not be returned. If you need a check
copy, call us or request a copy at our V For Brokerage Accounts: A minimum	Web site (a fee may apply).	•
appearing on your checks by completi For Mutual Fund Accounts: Checkw	ng Section 1. riting is available only for money marl spectus to be sure your fund offers che	ket funds, and most funds have a \$500 ckwriting. Your name and address will be
		Please continue
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		For Fidelity use only
Fidelity		
Signature Card for (C	
	ue or black pen, and print clearly in CAPITA	
This card supersedes any already on file for the sam Indicate the number of signature		
	ignatures (for business accounts only)	·
Account Number: Brokerage	ioo ooooo	Mutual Fund
Print Names	Signature	Date

BROKERAGE ACCOUNT CHECK PERSONALIZATION Your name and address will be printed on checks, but you may customize them with the following options: ☐ Name(s) Only ☐ Name(s), Address, and Daytime Telephone Number ☐ Name(s), Address, and Evening Telephone Number **Important Reminders:** • All owners must complete the signature card. Print your name(s) at left, and sign within the box(es) to the right. For UGMA/UTMA accounts only the custodian should sign. • For business accounts, all authorized persons should sign. **DOCUMENTATION TO ADD OR CHANGE A SIGNATURE** Please provide the following documentation in order to add or change an individual's checkwriting privileges: **Business Accounts** Certified Copy of the Corporate Resolution, dated within 60 days documenting new signers ☐ Signature Guarantee of an Officer other than new signers Trust Account ☐ Signature Guarantee of current trustee ☐ Trust Certification of investment power form



Documentation authorizing the person to sign on behalf of the account. If you are unsure, call Fidelity for instructions.

PO Box 770001, Cincinnati, OH 45277-0002 Fidelity Distributors Corporation Fidelity Brokerage Services LLC, Member NYSE, SIPC

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Fiduciary

By signing this signature card on the reverse side, the signatory(ies) agree(s) to be subject to the terms and conditions, guidelines, and rules applicable to your account as now in effect and as amended from time to time, of the fund(s), and of UMB Bank, N.A. ("the Bank"), as they pertain to the use of redemption checks; therefore, all registered owners must sign this signature card. All checks will require only one signature unless otherwise indicated on the face of this card. Each signatory guarantees the genuineness of the other's signature on this card.

☐ Signature Guarantee of person authorized to act on behalf of the account

The Bank is hereby appointed agent by the account holders signing this card and, as such agent, is directed to request redemption of shares of such Fidelity fund(s) or cash in the core account as designated by the account holders from time to time, and as recorded on Fidelity's records, upon receipt of, and to the amount of, checks drawn upon this account(s). In so acting, the Bank shall be liable only for its own negligence. Account holders will be subject to the Bank's rules, regulations and associated laws governing check collection including the Uniform Commercial Code as enacted in the State of Missouri.

It is further agreed as follows for mutual fund accounts:

- 1. All items, with the exception of those drawn on Spartan® money market funds, must be for a minimum of \$500 (or such other minimum amounts as may from time to time be established upon prior written notice to the shareholders, including the accounts of Spartan® money market funds), or they may be returned to the shareholders marked "Refer to Maker."
- 2. This card supersedes any card already on file for the same fund or account number.
- 3. Refer to the fund prospectus for minimum check amounts and any applicable fees.
- 4. You may obtain a copy of the "Statement of Terms and Conditions" applicable to your account by calling Fidelity.