



VERIFICATION OF DEPOSIT REQUEST

QUALITY CONTROL REVERIFICATION

REQUESTOR INFORMATION

TYPE OF REQUEST

RETURN METHOD (Select ONE)

DATE:

COMPANY NAME

ATTENTION

ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE NUMBER

FAX NUMBER

CUSTOMER INFORMATION

CUSTOMER NAME (First Name, Last Name OR Company Name)

1

2

AUTHORIZATION DATE

CHECKING/SAVINGS
ACCOUNT TO CHARGE:

It is the policy of MUFG Union Bank N.A. ("Bank"), and Bank affiliates, including UnionBanc Investment Services, LLC, a SEC registered broker-dealer and a wholly-owned subsidiary of Bank, to deliver the completed request for Verification of Deposits (whether on the Bank's own form or on a non-Bank request form, each a "Verification") directly to the requestor / addressee ("Requestor") named therein. The Bank expressly disclaims any responsibility whatsoever to any person (without regard to whether such person is named as, or purports to be, a Requestor), who does not receive a completed Verification directly from the Bank.

I/we acknowledge and agree that: I/we can contact the Bank's Telephone Banking Department at (800) 238-4486 to inquire about the status of my/our request. In consideration of the Bank's acting on my/our herein request, I/we agree to release and hold the Bank harmless from any and all liability except that caused solely by its own gross negligence or willful misconduct. I/we further agree to pay the applicable fee for the Verification as set forth in the Bank's disclosures and agreements and related fee schedules for personal and business deposit accounts in effect from time to time. I/we understand that I/we have the right to revoke this authorization at any time before the Bank has sent the completed Verification to the Requestor. I/we authorize and direct the Bank to provide to the Requestor the account information I/we have requested. I/we understand and agree that: a) the Bank will send the completed Verification directly to the Requestor; b) the completed Verification may not be used other than for the intended purpose; c) any copy thereof provided to me/us will bear a conspicuous legend prohibiting the use thereof for any purpose by any person other than the Requestor; d) if the information provided herein is not accurate and complete and submitted in a timely manner, the Bank will be unable to process the Verification and will not return or respond to the original request; and e) if I/we do not print and send to the Bank via fax, the Fax Cover Sheet the Bank provided online to me/us at the time I/we created the request electronically AND either: (i) a copy of the Bank's Verification of Deposit request form, bearing my/our signatures, or (ii) a copy of a non-Bank request for verification of deposit, bearing my/our signatures, then I/we will have to repeat the process.

SIGNATURE -- Customer

DATE

SIGNATURE -- Customer

DATE

ACCOUNT TYPE

ACCOUNT NUMBER

ACCOUNT TYPE

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