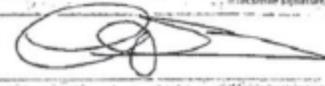


JPMorgan Account

Month/Date/Year _____ Social Security no. / Tax ID no. / Passport no. _____
 Account title Ghislaine Maxwell

Account type _____ Account number 6312
 Account type _____ Account number _____
 BAC # _____

All Accountholders/Signers must sign this Signature Form exactly as the checks/instructions will be signed.

Print (Accountholder/Signer, Trustee, Custodian, Director, etc.)	Title	SIGN HERE	<input type="checkbox"/> if facsimile signature, check box
<u>Ghislaine Maxwell</u>		X 	<input type="checkbox"/>
		X	<input type="checkbox"/>
<u>DANA BURNS</u>		X 	<input type="checkbox"/>
		X	<input type="checkbox"/>

Is this an existing account? yes no If yes, does this card replace all other cards against this account? yes no

Signing instructions (Please see back of card if necessary):

JPMorgan Account

Month/Date/Year _____ Social Security no. / Tax ID no. / Passport no. _____
 Account title _____

Account type _____ Account number _____
 Account type _____ Account number _____
 BAC # _____

All Accountholders/Signers must sign this Signature Form exactly as the checks/instructions will be signed.

Print (Accountholder/Signer, Trustee, Custodian, Director, etc.)	Title	SIGN HERE	<input type="checkbox"/> if facsimile signature, check box
<u>Ghislaine Maxwell</u>		X 	<input type="checkbox"/>
		X	<input type="checkbox"/>
<u>DANA BURNS</u>		X 	<input type="checkbox"/>
		X	<input type="checkbox"/>

Is this an existing account? yes no If yes, does this card replace all other cards against this account? yes no

Signing instructions (Please see back of card if necessary):

