



AFFILIATES IDENTITY REPORT

Dear Client:

Please complete the attached form in reference to SEC Rule 144. *(an affiliate is any officer or director who owns a registered position within that company's organization. Please note this form can be updated & submitted to WST at any time)*

Today's Date: _____

Company Name & CUSIP #: _____

Class of Stock: _____
(common, preferred, ect.)

Name & Title: _____
(person completing this form)

(Please print the name and title of the officer or director)

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____
- 8) _____
- 9) _____
- 10) _____