

VENTURE SECURITIES, INC.		8/F STI Holdings Center 6764 Ayala Avenue, Makati City 1226		Office Phone: 848-6505 Trading Floor : 891-9420-21 Fax: 848-6505
SPECIMEN SIGNATURE CARD (Corporate)			<input type="checkbox"/> Cash <input type="checkbox"/> Margin <input type="checkbox"/> Discretionary	<input type="checkbox"/> Others
ACCOUNT NAME :				
POSTAL ADDRESS : (No. & Street, Building, Town/District, City/Province, Postal/Zip Code, Country)				
TELEPHONE NO. :		FAX NO.		TIN:
SIGNATURE REQUIREMENT:(Please tick one)		<input type="checkbox"/> Single	<input type="checkbox"/> Any Two	Others _____
(Each signatory must have three specimen signatures)				
Name and Position (Please print)		Name and Positon (Please print)		
IMPORTANT: Certicates will not be transferred unless a specimen signature of the owner is on file with the transfer agents of the Company. Please fill out this card and return to us.				<i>Signature verified by:</i>

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