



NEW REPUBLIC TRUST
 New Republic Trust
 6932 San Padre Cir.
 Buena Park,
 CA 90620,
 USA

LETTER OF INSTRUCTION

Transfers

You must submit original certificates with this Letter of Instruction. Shares held in Book-entry form need not be submitted, though this form must still be completed. Each stock certificate submitted with this letter of instruction must have a properly executed stock power that includes an original signature with a Medallion Guarantee.

<https://newrepublictrust.com/>
info@newrepublictrust.com

A CHECK COVERING THE COST OF THIS TRANSFER INCLUDING MAILING FEES MUST ACCOMPANY THIS PACKAGE

ISSUER NAME:

PRESENTER

**** IF PRESENTER IS NOT THE ISSUER OR REGISTERED SHAREHOLDER, A 3RD PARTY RELEASE WILL BE REQUIRED****

NAME: _____ **PHONE NUMBER:** _____ **E-MAIL ADDRESS:** _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

SIGNATURE(S) OF PRESENTER: _____
If signature is by a trustee, executor, administrator, guardian, attorney-in-fact, corporate officer or other acting in a fiduciary or representative capacity, it must be so indicated and proper evidence must be submitted with this package.

CERTIFICATES PRESENTED FOR TRANSFER

CERTIFICATE #	SHAREHOLDER NAME (LISTED ON FACE OF CERTIFICATE)	NUMBER OF SHARES
		TOTAL SHARES

COST BASIS REQUIRED FOR ALL TRANSFERS THAT INCLUDE A CHANGE OF BENEFICIAL OWNERSHIP

<input type="checkbox"/> SALE	DATE OF SALE: _____	SALE PRICE PER SHARE: \$ _____
<input type="checkbox"/> GIFT	DATE OF GIFT: _____	FAIR MARKET VALUE PER SHARE ON GIFT DATE: \$ _____
<input type="checkbox"/> INHERITANCE	DATE OF DEATH: _____	FAIR MARKET VALUE PER SHARE ON DATE OF DEATH: \$ _____

REGISTRATION OF NEW CERTIFICATE(S)

CHECK IF MORE THAN ONE TRANSFEREE (FILL OUT ADDENDUM ON PAGE 2)

NAME(S): _____

SOCIAL SECURITY NUMBER: _____ -OR- TAX ID NUMBER: _____

INDIVIDUAL CORPORATION PARTNERSHIP LLC TENANTS IN COMMON TENANTS BY THE ENTIRETIES JOINT TENANTS JTWROS TRUST

ADDRESS: _____ CITY: _____ STATE/PROV.: _____ ZIP: _____ COUNTRY: _____

PHONE: _____ FAX: _____ E-MAIL: _____

_____ CERTIFICATES X _____ SHARES = _____ **TOTAL SHARES ISSUED**

_____ CERTIFICATES X _____ SHARES = _____

SHIPPING INSTRUCTIONS

SHIP TO:	FEDEX _____ ACCT #: _____
ADDRESS:	RECIPIENT _____ THIRD PARTY _____
ADDRESS 2:	CERTIFICATES WILL NOT BE DELIVERED WITHOUT A SHIPPING ACCOUNT NUMBER OR CREDIT CARD NUMBER. IF PAYING BY CREDIT CARD, PLEASE MAKE SURE TO FILL OUT AND SUBMIT OUR "CREDIT CARD CHARGE VERIFICATION FORM" ALONG WITH THIS L.O.I. THE FORM IS AVAILABLE ON OUR WEBSITE AT: NEWREPUBLICTRUST.COM
CITY: _____ STATE/PROVINCE: _____ ZIP: _____	
COUNTRY: _____ PHONE: _____	
SPECIAL SHIPPING INSTRUCTIONS:	



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ADDITIONAL SHAREHOLDER ADDENDUM

Transfer

SHAREHOLDER # _____ OF _____

PLEASE ATTACH ALL ADDENDUMS TO TRANSFER REQUEST

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REGISTRATION OF NEW CERTIFICATE(S)

NAME(S):				
SOCIAL SECURITY NUMBER: _____ - _____ - _____		-OR- TAX ID NUMBER: _____ - _____		
INDIVIDUAL	CORP	PARTNERSHIP	LLC	TENANTS IN COMMON
				TENANTS BY THE ENTIRETIES
				JOINT TENANTS
				JTWROS
ADDRESS:		CITY:	STATE/PROV.:	ZIP: COUNTRY:
PHONE:		FAX:	E-MAIL:	
_____ CERTIFICATES X _____	SHARES = _____	TOTAL SHARES ISSUED		
_____ CERTIFICATES X _____	SHARES = _____	_____		

SHIPPING INSTRUCTIONS

SHIP TO:	FEDEX _____ ACCT #: _____
ADDRESS:	RECIPIENT _____ THIRD PARTY _____
CITY: STATE/PROVINCE: ZIP:	CERTIFICATES WILL NOT BE DELIVERED WITHOUT A SHIPPING ACCOUNT NUMBER OR CREDIT CARD NUMBER. IF PAYING BY CREDIT CARD, PLEASE MAKE SURE TO FILL OUT AND SUBMIT OUR "CREDIT CARD CHARGE VERIFICATION FORM" ALONG WITH THIS L.O.I. THE FORM IS AVAILABLE ON OUR WEBSITE AT: NEWREPUBLICTRUST.COM
COUNTRY: PHONE:	
SPECIAL SHIPPING INSTRUCTIONS:	