

eNewsletter Request

Shareholders with portal accounts are able to change their Raven's Circle delivery method, update their mailing address and perform other tasks via Qenek. Alternatively, shareholders may complete and return this form.

THIS E-NEWSLETTER REQUEST IS FOR:

CHOOSE ONLY	MYSELF list yo	ur full name (first, mid	ddle, last, suffix)		
ONE.	MY WARD, for whom I am custodian: list your ward's full name (first, middle, last, suffix)				
IRI mail may	y be returned. Onlir	atch the address you forms and informat ebsite, at your local po	u have on file ion on changing	an address with t	he Postal Service are
Address				_ Date of Birth	(MM/DD/YYYY)
				Social Securit	y No
(Ci	ty)	(State)	(Zip)	_	(last four digits only)
Home Ph.		Work Ph		Cell Ph	
fa Sl	ster, check this box	about reducing paper to receive interactive d in the eNewsletter p D!	newsletters ins	tead of paper copi	es.
SIGNATURE:			DATE:		
Mail it:Scan or	take photo of	ED FORM: er Relations, PO Bo document and e call ASAP to ensur	mail to: <u>shar</u>	<u>reholderrecords</u>	
QUESTIO	NS? Call CIRI S	hareholder Relatio	ns: 800-764-2	2474 or 907-26	3-5191
I		H SEQ:			
	email	s, do not add/change paddress must be change	d in Qenek	ldress; contact SH t	o advise primary
UPDATE C	COMMENTS: Y N	FORMS: SW	DD QENEK		
ENTERED:	: DA1	TE:	VERIFIED:	DATE:	