

EXHIBIT B

SIGNATURE FORM

Date _____

Company _____

Name of Signatory _____

Title _____

A specimen of your signature is required to reproduce in facsimile form. Please affix your signature, **using black ink**, in the three windows below.

┌	┐	□
└	┘	
┌	┐	□
└	┘	
┌	┐	□
└	┘	

NOTE: Please show your order of preference by numbering 1,2, and 3 in boxes.