

# The Morgan Account

10 / 20 / 05  
 Month      Date      Year

(CIRCLE ONE BELOW)  
 Social Security no. / Tax ID no. / Passport no.

Account title

DDA  
 Account type

DDA

Account type

MMIA

ASSET

ACCOUNT NUMBER

ACCOUNT NUMBER

ACCOUNT NUMBER

ACCOUNT NUMBER

BAC #

All Accountholders/Signers must sign this Signature Form exactly as the checks/instructions will be signed.

| Print (Accountholder/Signer, Trustee, Custodian, Director, etc.) | Title | SIGN HERE |  | If facsimile signature, check box <input type="checkbox"/> |
|--|-------|-----------|--|--|
| Harry Beller   |       | X         |  | <input type="checkbox"/>                                   |
|  |       | X         |  | <input type="checkbox"/>                                   |
| Print (other)  | Title | X         |  | <input type="checkbox"/>                                   |
| Print (other)  | Title | X         |  | <input type="checkbox"/>                                   |

Is this an existing account?  yes  no      If yes, does this card replace all other cards against this account?  yes  no

Signing instructions (Please use back of card if necessary.)

10/20/05      194

SDNY\_GM\_02775064

Confidential Treatment Requested by JPMorgan Chase

JPM-SDNY-00065517

**SUBJECT TO PROTECTIVE ORDER PARAGRAPHS 7, 8, 9, 10, 15, and 17**

EFTA\_00261704

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