Glitnir - Custo	<u>dial Realig</u>	<u>nment Request</u>	t Form					
THE SAME DEPOSITO \$3,000 NON-REFUND INFORMATION PLEAS	ORY WITHOUT AND DABLE ADMINIST SE VISIT THE GLIT	NY CHANGE BEING MAD RATIVE FEE PER-POSITION	E TO BENEFICIAL O' ON TO DEFRAY THE .GLITNIRBANK.CO	WNERSHIP OF TH COST ASSOCIATI M NOTWITHSTAI	IE BOND POSITION ED WITH ADMINIS NDING THE FORE	BLOCKED POSITIONS TO A NEW CUSTODIAN WITHIN INS. THE WINDING-UP BOARD HAS ESTABLISHED A STERING CUSTODIAL REALINGMENTS. FOR FURTHER GOING, IT IS POSSIBLE THAT ANY COMPOSITION		
Depository:								
Section A. Grant	ing Particp	ant Information	("Granting Pa	arty" <u>)</u>				
1. Depository Participar	nt Name:				Bankrupto	gnment Request Form should be submitted to Epiq cy Solutions, LLC ("Epiq") along with the Administrative necessary signature verification documentation. If you		
2. Depository Participant Number:				have any questions relating to the requirements associated with this process, please contact <b>Glitnir@epiqsystems.com</b> for additional information.				
3. E-mail Address:					are submi	Realignment Request Form, Fee and Signature Verificati itted to Epiq, they will be reviewed and processed. Epiq		
Section B. Receiving Participant Information ("Receiving Party")						will then notify you via e-mail regarding the necessary steps to complete this request.		
1. Depository Participar	nt Name:							
2. Depository Participar	nt Number:							
3. E-mail Address:								
Section C. Position		, SELECT THE DESIGNAT	ED CHECK BOX ANI	D ATTACH THE A	PPROVED FORM (	OF SCHEDULE OF BLOCKED POSITIONS.		
See attached Sched	dule of Blocking	Numbers						
1. ISIN:								
2. Blocking Number:								
3. Blocked Amount:			Cu	rrency:				
Glitnir hf. (the "V directors, office or claims, wheth taken by such In	WuB") and Epiq rs, agents, emp ner direct or ind ndemnified Part	Bankruptcy Solutions, loyees or affiliates, for irect, whether joint or y in connection with th	LLC (together, the any loss, expense several, against on his request for real	e "Indemnified I (including with r incurred by sud lignment.	Parties"), includi out limitation at ch Indemnified F	y and hold harmless the Winding-Up Board of ing any and all of each Indemnified Party's ttorneys' fees and expenses), liability, damage Party arising out, or resulting from any actions the blocked position(s) to be realigned.		
Signed by the Granting Party (Name & Position of Signor)					Signed by the Receiving Party (Name & Position of Signor)			
Date:				Date	2:			
FOR EPIQ USE ONLY - RE.	ALIGNMENT BARCC	DDE				FOR EPIQ USE ONLY - FILED/RECEIVED		