

DIVIDEND RE-INVESTMENT PLAN APPLICATION FORM

Section 1 YOU	R DETAILS
Full name of First Named Holder	Company to which this plan applies
1.	JPMorgan Russian Securities plc
Joint Holder(s) – Maximum four (4) holders	Shareholder reference (8 or 11 digits) (Note 1)
2.	
3.	This application only applies to the holding above. Separate applications must be completed for additional
4.	holdings held in the above Company.
Full Address of First Named Holder	Shares to which this plan applies
	ORDINARY SHARES OF 1P EACH HELD IN CERTIFICATED FORM
Ct	
Country	
Post Code	
• In order to participate in the Plan, in respect of a particular dividend, this form must be correctly completed and received at least fifteen (15) working days prior to the next dividend payment date. Section 2 DECLARATION: All shareholders must sign and print their full names Declaration: A copy of the Terms and Conditions referred to herein have been issued to you/made available on www.shareview.co.uk/info/drip or as detailed in the accompanying literature. These form the basis on which our services will be provided to you. For your own benefit you should read these Terms carefully before signing the application. If you do not understand any point please contact us on the number indicated in the Guidance Notes. To: Equiniti Financial Services Limited (Equiniti) By signing this form I/we apply to join the Dividend Re-Investment Plan (the Plan) for each future dividend paid on the fully paid up shares shown above in Section 1 held by myself/ourselves to which the Plan is applied. I/We appoint Equiniti as my/our agent to arrange the purchase of fully paid up shares of the Company shown above in Section 1 in accordance with the Terms and Conditions of the Plan. This request will remain in force until revoked in writing by me/us, or otherwise cancelled in accordance with the Terms and Conditions of the Plan. To JPMorgan Russian Securities plc I/we the undersigned instruct JPMorgan Russian Securities plc to pay my/our dividend in respect of all the shares applying	
to the Plan to Equiniti. (Note 2)	pay my, our dividend in respect of all the shares applying
Signature 1	Signature 2
Print Full Name	Print Full Name
Signature 3	Signature 4
Print Full Name	Print Full Name
Today's Date (Note 3) If signing as Power of Attorney or other authority please print your full name (Note 4)	

Equiniti Limited and Equiniti Financial Services Limited are part of the Equiniti Group. Their registered offices are Aspect House, Spencer Road, Lancing, West Sussex BN99 6DA United Kingdom. Company share registration, employee scheme and pension administration services are provided through Equiniti Limited, which is registered in England & Wales with No. 6226088. Investment and general insurance services are provided through Equiniti Financial Services Limited, which is registered in England & Wales with No. 6208699 and is authorised and regulated by the UK Financial Conduct Authority no. 468631.

Bodies corporate must execute under their common seal or in accordance with section 44 of the Companies Act 2006.

GUIDANCE NOTES

You can find the answer to most questions and also send us your query securely by completing the online form at www.shareview.co.uk/info/drip

Or you can call us on +44 (0) 371 384 2945 Please use the country code when calling from outside the UK. When you call, please quote your 11 digit Shareholder Reference number. Lines are open from 8.30am to 5.30pm (UK time) Monday to Friday, excluding public holidays in England and Wales.

You can also contact us by using the Relay UK website at www.relayuk.bt.com

Once completed please send your form to;

Share Dividend Team, Equiniti, Aspect House, Spencer Road, Lancing, West Sussex, BN99 6DA United Kingdom

Note 1: Shareholder reference (8 or 11 digits)

This can be found on your share certificate or previous tax voucher/dividend confirmation.

Note 2: Print & Sign

All shareholders must sign the declaration and print their full name in the appropriate boxes provided.

Note 3: Today's Date

Dividend Election deadline

To participate in respect of a particular dividend, Equiniti must receive the fully completed form at least **fifteen** (15) working days prior to the next dividend payment date.

Note 4: Power of Attorney (if applicable)

Complete your full name here if you are signing as a power of attorney.

To avoid rejection if you have not previously recorded the Power of Attorney document with us please ensure that you send us either the original document or a photocopy with this form. If you are sending a photocopy, please make sure every page is signed with an original signature, either by the person granting the Power or by a solicitor or stockbroker, to confirm that it is a true and complete copy of the original.