

To: Petroleum Fund Staff

Re: Signatory Authority Change for Petroleum Fund Operator (Claimant)

To whom it may concern:

I, _____, have been designated as the operator's authorized representative for _____ . I am replacing _____ , and I understand that this means I am legally responsible for the review and submittal of official documents relating to the Nevada Petroleum Fund (Fund) including, but not limited to, coverage applications, cost proposals, and claim submittals on behalf of the claimant.

From this day forward, I will be the authorized representative for the following cases:

My complete contact information is as follows:

Representing