

**PISMO COAST VILLAGE RV RESORT
SHAREHOLDER CONTACT INFORMATION**

PISMO COAST VILLAGE CERTIFICATE NUMBER(S) _____

CURRENT _____

VESTING(S): _____

**Corporate Office will forward any change of address to our transfer agent, Computershare.

SHAREHOLDER #1

FULL NAME _____
(First, Middle, Last)

MAILING ADDRESS _____
(Street)

(City, State, Zip)

HOME TELEPHONE _____

CELL TELEPHONE _____

EMAIL _____

WORK TELEPHONE _____

OTHER INFORMATION _____

SHAREHOLDER #2

FULL NAME _____
(First, Middle, Last)

MAILING ADDRESS _____
(Street)

(City, State, Zip)

HOME TELEPHONE _____

CELL TELEPHONE _____

EMAIL _____

WORK TELEPHONE _____

OTHER INFORMATION _____

SIGNATURE _____

DATE _____

SIGNATURE _____

DATE _____