General Company Information

1. Application Name
   Issuer Name
   Company Address 1
   Company Address 2
   Company City
   Company State/Province:
   Company Postal Code
   Company Country
   EU Home Member Country, if other than the country of the listing in the application
   Company Telephone
   Company Website
   Company Registration Number
   LEI code (Legal Identity Identifier)
   Name of the Company’s News Distributor

Issuer Type

What type of financial instruments is the company applying to list?

Application Contacts

Please provide contacts for the purposes of processing this Application. In addition, Nasdaq recommends that you share access to this form with at least one other representative by entering their email address on our Share Your Form page.

<table>
<thead>
<tr>
<th>Company Contact *</th>
<th>Additional Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name *</td>
<td></td>
</tr>
<tr>
<td>Title/Firm</td>
<td></td>
</tr>
<tr>
<td>Phone *</td>
<td></td>
</tr>
<tr>
<td>Email *</td>
<td></td>
</tr>
</tbody>
</table>

Billing Contacts
Please provide the Company's billing address, if the address is different than the Company Address provided above.

☐ Check here, if billing address is the same.

Billing Address 1
Billing Address 2
Billing City
Billing State/Province
Billing Postal Code
Billing Country

VAT-number (EU Countries Only)

Please provide contact information for someone within your Company's Finance department.

Billing Contact

Name
Title
Email
Telephone
Fax

**SUPPORTING DOCUMENTS**

**Supporting Documents**

**Other Supporting Documentation**

Prior to approval, Nasdaq will require Rules of the Exchange supporting documentation. These documents should be submitted electronically. Documents should be provided using one of the following formats: MS Word, MS Excel, CSV or PDF.

Uploading documents is easy:

Select document using the "Browse" button.

**WORKING CAPITAL AND ACCOUNTING STANDARD**

Please state whether the issuer's existing working capital is sufficient to cover the Issuer's needs over the next twelve months.

Please comment and confirm. If no, please state when the expected deficiency will occur (month/year)

Please state what is the issuer's accounting standard:
I have been authorized by the company and have the legal authority to provide information on the company’s behalf, to the best of my knowledge and belief, the information provided is true and correct as of this date; and I will promptly notify Nasdaq of any material changes.