



CONFIRMATION OF FORWARD RATE AGREEMENT

To: _____ (“Counterparty”)

Legal Entity Identifier (LEI): _____

Attention: _____

Fax: _____

Email: _____

From: Wells Fargo Bank, N.A. (“Wells Fargo”)

Legal Entity Identifier (LEI): KB1H1DSPRFMYMCUFXT09

Phone: 704-410-5111

Fax: 1-844-879-8056

Email: inboundconfirms1@wellsfargo.com

Wells Fargo Ref. No: _____

Date: MMMM DD, YYYY

Dear Sir or Madam:

This confirms the terms of the Transaction described below between Counterparty and Wells Fargo. The definitions and provisions contained in the 2021 ISDA Interest Rates Derivatives Definitions (the “2021 ISDA Definitions”), as published by the International Swaps and Derivatives Association, Inc., are incorporated into this Confirmation. In the event of any inconsistency between those definitions and provisions and this Confirmation, this Confirmation will govern.

This Confirmation supplements, forms part of, and is subject to, the ISDA Master Agreement between Wells Fargo and Counterparty dated as of MMMM DD, YYYY, as amended and supplemented from time to time (the “ISDA Master Agreement”). All provisions contained or incorporated by reference in the ISDA Master Agreement will govern this Confirmation except as expressly modified herein.

1. The terms of the particular Transaction to which the Confirmation relates are as follows:

Transaction Type: Forward Rate Agreement

Currency for Payments: [U.S. Dollars]

Wells Fargo Ref. No: _____

Notional Amount: [USD] _____

Term:

Trade Date: MMMM DD, YYYY

Effective Date: MMMM DD, YYYY

Termination Date: MMMM DD, YYYY[, subject to adjustment in accordance with the [Preceding / Modified Following / Following] Business Day Convention.]

Fixed Amounts:

Fixed Rate Payer: [Counterparty / Wells Fargo]

Fixed Rate: _____%

Floating Amounts:

Floating Rate Payer: [Wells Fargo / Counterparty]

Floating Rate Payer Payment Date: The Effective Date

Business Day Convention: [Preceding / Modified Following / Following]

Business Days: [New York and London]

Floating Rate Option: [USD-LIBOR]

Designated Maturity: [3 Months]

Spread: [[Plus / Minus] _____% / None]

Floating Rate Day
Count Fraction: Actual/360

Reset Dates: The [first / last] day of each Calculation Period

FRA Discounting: [Applicable]

2. The additional provisions of this Confirmation are as follows:

Calculation Agent: Per the ISDA Master Agreement, or if not specified, Wells Fargo

Payment Instructions: Wells Fargo: Please contact us for payment instructions

Counterparty: Per your standing payment instructions or debit authorization if provided to Wells Fargo, as relevant. If not provided, please contact us in order for payment to be made

Wells Fargo Contacts: Settlement and/or Rate Resets:

Wells Fargo Ref. No: _____

Phone: 1-800-249-3865

Fax: 704-410-8511

Collateral:

Phone: 704-410-9218

Fax: 704-410-8515

Email: WellsFargoCollateralManagement@WellsFargo.com

Please quote transaction reference number.

Eligibility:

Each party represents that it is an "eligible contract participant" within the meaning of the Commodity Exchange Act (7 U.S.C. § 1 et seq), as amended by the Dodd Frank Wall Street Reform and Consumer Protection Act and as modified by 17 C.F.R. § 1.3. The ISDA Non-ECP Guarantor Exclusionary Terms available here: <https://www.isda.org/a/OviDE/27666729-2-isdanon-ecpexclusionaryterms.pdf> ("Exclusionary Terms") are incorporated by reference in this Confirmation and apply to the entry into this Transaction by the parties within the meaning of §2(e) of the Commodity Exchange Act. For the avoidance of doubt, the Exclusionary Terms will not apply, in respect of any guarantor, to any unwind, termination, transfer or other disposition of this Transaction, whether in whole or in part, to the extent this Transaction is lawfully guaranteed by such guarantor, whether or not such guarantor is an ECP (as defined in the Exclusionary Terms) when such unwind, termination, transfer or other disposition is agreed or effected.

Wells Fargo Ref. No: _____

Please confirm that the foregoing correctly sets forth the terms of our agreement by having your authorized signatory execute a copy of this Confirmation and returning it to us.

Very truly yours,
Wells Fargo Bank, N.A.

By: _____
Name: Mark Silke
Title: Authorized Signatory

Accepted and confirmed as of date first written above:

By: _____
Name:
Title: