

CLAIM FORM

If you have questions about completing this Claim Form, you may contact the Wells Fargo Cole Settlement Administrator at 888-275-7520, or Class Counsel at 206-682-5600 (phone), WFBannualfeeslawsuit@Tousley.com (email), or www.tousley.com (website)

- 1. You Name(s) as it/they appeared on your Line of Credit Account(s):

- 2. Current Address: _____

- 3. Check which Line of Credit Account(s) you wish to Link to your PMA account:
 - Personal Credit Management line of credit account
 - Home equity line of credit account
 - Private Client Services line of credit account
- 4. Line of Credit Account(s) Number(s) (if known): _____

- 5. Checking Account Number (if known): _____

AS A CONDITION OF PAYMENT, YOU MUST AFFIRM THE FOLLOWING:

You are only entitled to a refund if your answer is "Yes") to the question below. If you have any questions or concerns about providing an answer, please contact the above-listed law firm representing the Class.

Do you consent to Wells Fargo linking your Line of Credit Account(s) checked in paragraph 3 above to your Portfolio Management Account, or the Portfolio Management Account owned by a member of your household, in Wells Fargo's computer system?

YES / / NO / /

By my signature below, I hereby certify, under penalty of perjury under the federal and state laws of the United States, that the foregoing information is true and correct.

Signed this _____ day of _____, 2008, in _____, _____.

(Month) (City) (State)

Claimant (signature)

Return form to:
Wells Fargo Class Action Administrator
PO Box 3207
Portland, OR 97208-3207