

Fidelity Investments 403(b) Individual Custodial Account Application

GENERAL INSTRUCTIONS

Opening a new account: Please complete this form and sign it on the back. You may revoke the beneficiary designation and designate a different beneficiary by submitting a new Beneficiary Designation Form to Fidelity. You will receive written confirmation once your account is established. At that point you can submit a Salary Reduction Agreement to your employer who can then forward contributions to your account. Please contact Fidelity, your employer, or tax advisor to determine your maximum allowable contribution.

Moving assets from an existing plan: To make a transfer or rollover contribution, please complete the enclosed transfer/rollover form. If a form was not included within your enrollment kit, please call to request a form.

Fees: Your account may be subject to an annual maintenance and/or recordkeeping fee.

Mailing instructions: Return this form in the enclosed postage-paid envelope or to
Fidelity Investments, P.O. Box 770002, Cincinnati, OH 45277-0090

Questions? Call Fidelity Investments at 1-800-343-0860, Monday through Friday, from 8:00 A.M. to midnight ET, or visit us at www.fidelity.com/atwork.

YOUR INFORMATION

Please use a **black** pen and print clearly in **CAPITAL LETTERS**.

Social Security #:	<input type="text"/>	Date of Birth:	<input type="text"/>
First Name:	<input type="text"/>		
Last Name:	<input type="text"/>		
Street Address:	<input type="text"/>		
Address Line 2:	<input type="text"/>		
City:	<input type="text"/>	State:	<input type="text"/>
Zip:	<input type="text"/>		
Daytime Phone:	<input type="text"/>	Evening Phone:	<input type="text"/>
Name of Employer:	<input type="text"/>	Plan Number (if known):	<input type="text"/>
I am: <input type="checkbox"/> Single OR <input type="checkbox"/> Married	Name of Site/Division: <input type="text"/>		

Fidelity Investments Institutional Operations Company, Inc.



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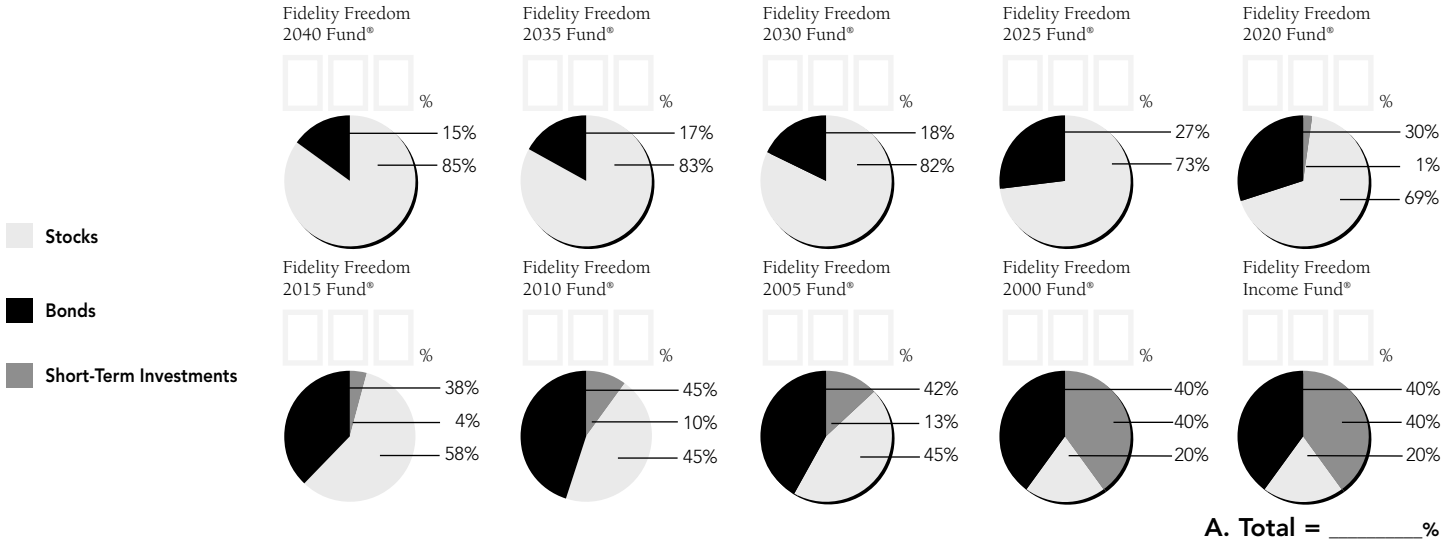
SELECTION OF INVESTMENT OPTIONS

You may choose to invest in the Fidelity Freedom Funds,[®] the Fidelity Retirement Government Money Market Portfolio, or other investment options Fidelity has to offer. You may select one option or a combination of the three. If you choose a combination, be sure the total of your investments adds up to 100% (Sections A + B + C below).

NOTE: For investors who prefer to create their own portfolio, Fidelity offers a wide selection of investments to choose from. Contact Fidelity for a free prospectus. Please read it carefully before you invest.

A. Freedom Fund Options

Choose the Fidelity Freedom Fund that matches your anticipated retirement date. If you choose to invest only in Freedom funds, make sure your Freedom funds selection(s) totals 100%.



The percentages represent anticipated target asset allocation at March 31, 2006.

The target asset mixes presented here were developed by Strategic Advisers, Inc., a registered investment advisor and a Fidelity Investments company. These funds are subject to the volatility of the financial markets in the U.S. and abroad, and may be subject to the additional risks associated with investing in high yield, small cap, and foreign securities.

B. Fidelity Retirement Government Money Market Portfolio Option

Investment Option
Fund Code:

Fund Name:

Fidelity Retirement Government Money Market Portfolio

Please use whole percentages
Percentage:

%

B. Total = _____%

C. Other Investment Options

Please check here if you are selecting more than four investment options.

Investment Options
Fund Code:

Fund Name:

Please use whole percentages
Percentage:

%
 %
 %
 %

C. Total = _____%

Grand Total (A + B + C) = 100%

Keep in mind that if your figures don't add up to 100% or if you leave this section blank, your contributions will be invested in the default option described in your employer's summary plan document, or the Individual Custodial Account Agreement.

DESIGNATING YOUR BENEFICIARY(IES)

Please check here if you have more than two primary beneficiaries or one contingent beneficiary.

You are not limited to two primary beneficiaries and one contingent beneficiary. To assign additional beneficiaries, or to designate a more complex beneficiary designation, please attach, sign, and date a separate piece of paper.

When designating primary and contingent beneficiaries, please use whole percentages and be sure that the percentages for each group of beneficiaries total 100%. Your primary beneficiary cannot be your contingent beneficiary. If you designate a trust as a beneficiary, please include the date the trust was created, and the trustee's name.

If more than one person is named and no percentages are indicated, payment will be made in equal shares to your primary beneficiary(ies) who survives you. If a percentage is indicated and a primary beneficiary(ies) does not survive you, the percentage of that beneficiary's designated share shall be divided among the surviving primary beneficiary(ies) in proportion to the percentage selected for them.

Primary Beneficiary(ies)

I hereby designate the person(s) named below as primary beneficiary(ies) to receive payment of the value of my account(s) under the plan upon my death.

1. Individual or Trust Name: Percentage: %

Date of Birth or Trust Date:

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Relationship to Applicant:

Spouse **OR** Trust **OR** Other

2. Individual or Trust Name: Percentage: %

Date of Birth or Trust Date:

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Relationship to Applicant:

Spouse **OR** Trust **OR** Other

Contingent Beneficiary

If there is no primary beneficiary living at the time of my death, I hereby specify that the value of my account is to be distributed to my contingent beneficiary listed below. **Please note:** Your primary beneficiary cannot be your contingent beneficiary.

Individual or Trust Name: Percentage: %

Date of Birth or Trust Date:

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Relationship to Applicant:

Spouse **OR** Trust **OR** Other

If you are assigning additional contingent beneficiaries, payment to contingent beneficiaries will be made according to the rules of succession described under Primary Beneficiary(ies).

AUTHORIZATION AND SIGNATURE

Individual Authorization: By executing this form

- I certify under penalties of perjury that my Social Security number in Section 1 on this form is correct.
- I acknowledge that I have read the prospectus of any mutual fund in which I invest and that it is my responsibility to read the prospectus(es) of any fund into which I exchange and agree to the terms.
- I am aware that the beneficiary information included in this form becomes effective when delivered to Fidelity and will remain in effect until I deliver another completed and signed Beneficiary Designation Form to Fidelity with a later date.
- I am aware that the beneficiary information provided herein shall apply to all my Fidelity accounts under the plan listed in Section 1 for which Fidelity Management Trust Company (FMTC) (or its affiliates and/or any successor appointed pursuant to the terms of such accounts or trust agreement in effect between FMTC and my Employer, as applicable) acts as trustee or custodian, and shall replace all previous designation(s) I have made on any of my accounts.
- **I understand that my account may be subject to an annual maintenance and/or recordkeeping fee.**
- I hereby adopt the Fidelity Investments 403(b)(7) Individual Custodial Account (“the Program”) and certify that I have received and read the Individual Custodial Agreement for the Program.
- I acknowledge that the provisions of the Program shall be governed by the laws of the Commonwealth of Massachusetts.
- I understand that I may designate a beneficiary for my assets accumulated under the Program and that if I choose not to designate a beneficiary, my beneficiary will be my surviving spouse, or if I do not have a surviving spouse, my estate.
- I recognize that although FMTC is a bank, neither Fidelity Distributors Corporation nor any mutual fund in which my 403(b) account may be invested is a bank, and mutual fund shares are not backed or guaranteed by any bank or insured by the FDIC.

Your Signature:

Date: