

\$25 Minimum Check Request Form

Owner Name:	(Please print)
Owner Number:	-
Last 4 of Taxpayer ID / Social Security Number:	-
Current Address:	-
	-
	-
\Box Check here if this is a new address and you would like Hilcorp to update our record	ds
Old Address: (if applicable)	_
	_
	-
Contact Information:	
Home: Fax: Cell:	
Email:	
I hereby request that my royalties be released to me when the total reaches §	<u>625.00</u>
SIGNATURE: DATE:	
Please provide any special instructions:	