

METROLIST SERVICES, INC.

KEYBOX TRANSFER FORM

This section to be completed by original holder of KeyBoxes

This is to inform MetroList Services, Inc. that _____
Print Subscriber/Lessee Name

Lessee/Owner of the following KeyBoxes, wishes to transfer possession of the KeyBoxes to:
_____. The KeyBox serial numbers are:

Print Name _____

As a condition of this transfer, I shall have paid all sums due MetroList Services, Inc. as of the date of this transfer.

Transferor's Signature _____ Date _____

This section to be completed by new holder of KeyBoxes

As the new responsible Lessee/Owner of such KeyBoxes, I hereby accept and assume all rights and obligations pursuant to the MetroList System Use and Lease/IBox Lease Agreement*.

Transferee's Name _____

Company Name _____

Company Street Address _____

City/State/Zip _____

Transferee's Signature _____ Date _____

**In order to transfer leased KeyBoxes, the new holder (Transferee) must sign a MetroList IBox Lease Agreement.*

MetroList Service Center

Sacramento

Placer

El Dorado

MetroList

Yolo

Lodi

Stockton

Modesto

Pleasanton

MetroList Authorized Representative

Date