



ORIX USA Corporation  
Corporate Finance Group  
1717 Main Street, Suite 900  
Dallas, TX 75201  
Telephone: (214) 237-2000  
Facsimile: (214) 237-2356

November 1, 2005

**International Swaps and Derivatives Association, Inc.**  
**Send to: [delhiprotocol@isda.org](mailto:delhiprotocol@isda.org)**

Dear Sirs,

### **2005 Delphi CDS Index Protocol - Adherence**

The purpose of this letter is to confirm our adherence to the 2005 Delphi CDS Index Protocol, as published by the International Swaps and Derivatives Association, Inc. on 27th October, 2005 (the "**Protocol**"). This letter constitutes an "Adherence Letter" as referred to in the Protocol.

The definitions and provisions contained in the Protocol are incorporated into this Adherence Letter, which will supplement and form part of each Covered Index Transaction (now or in the future) between us and each other Adhering Party.

#### **1. Specified Terms**

The terms of Schedule 1, Covered Index Transactions, shall apply.

#### **2. Appointment as Agent and Release**

We hereby appoint ISDA as our agent for the limited purposes of the Protocol and accordingly we waive, and hereby release ISDA from, any rights, claims, actions or causes of action whatsoever (whether in contract, tort or otherwise) arising out of, or in any way relating to, this Adherence Letter or our adherence to the Protocol or any actions contemplated as being required by ISDA.

#### **3. DTCC Account Number**

For purposes of electronic matching and counterparty recognition, our DTCC Account Number is as follows, but you understand and agree that our failure to provide any such details pursuant to this letter will not affect the legal validity and binding nature of the Protocol with respect to us:

DTCC Account Number: 773



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**4. Contact Details**

Our contact details for purposes of this Adherence Letter are:

Name: ORIX Finance Corp.  
Address: 1717 Main St., Suite 900  
Dallas, TX 75201  
Attn: Kasey Bray  
Telephone: (214) 237-2102  
Fax: (214) 237-2352  
E-mail: kbray@orix.com

We consent to the publication of the conformed copy of this letter by ISDA and to the disclosure by ISDA of the contents of this letter.

Yours faithfully,

**ORIX FINANCE CORP.**

By:

Name: Christopher L. Smith
Title: Authorized Representative
Signature: /s/ Christopher L. Smith