

AFFIDAVIT OF DOMICILE

STATE OF \_\_\_\_\_ )  
 ) SS: \_\_\_\_\_  
COUNTY OF \_\_\_\_\_ )

\_\_\_\_\_, being duly sworn, deposes and says:

I reside at \_\_\_\_\_, City of \_\_\_\_\_, County  
of \_\_\_\_\_. State of \_\_\_\_\_ and am  
Executor / Administrator / Survivor of \_\_\_\_\_, deceased, who  
died on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_. At the time of death  
the legal residence of said decedent was \_\_\_\_\_,  
City of \_\_\_\_\_, County of \_\_\_\_\_,  
State of \_\_\_\_\_.

He / She resided in the State of \_\_\_\_\_ for \_\_\_\_\_ years  
prior to death, and was not a resident of \_\_\_\_\_ or  

( State of Incorporation of the Stock )

  
any State (other than that of his / her Domicile) within the United States of America, at  
the time of death. That securities were physically located in the City of \_\_\_\_\_,  
State of \_\_\_\_\_ at the date of death of decedent.

Sworn to or affirmed before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_\_

My commission expires \_\_\_\_\_

Affix Seal

X \_\_\_\_\_  
( Signature of Deponent )