

AFFIDAVIT OF DOMICILE

(TO BE FILED BY INDIVIDUAL EXECUTOR, ADMINISTRATOR AND/OR SURVIVOR)

STATE OF _____)

ss:

COUNTY OF _____)

_____, being duly sworn, deposes and says that (he-she) resides at _____, State of _____, and is the (executor-administrator-survivor) of the estate of _____ deceased, who died on the _____ day of _____, 2 _____; that at the time of (his-her) death the domicile (legal residence) of said decedent was at _____; County of _____, State of _____, that this affidavit is made for the purpose of inducing Registrar and Transfer Company as Transfer Agent to transfer or deliver securities registered in the name of, or owned by said decedent at the time of (his-her) death.

(Executor-Administrator-and/or Survivor)

SWORN TO BEFORE ME THIS

_____ day of _____, 2 _____

(NOTARY PUBLIC)

MY COMMISSION EXPIRES _____

affix seal