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Affidavit of Domicile

(To be filled out by Individual Executor, Administrator and/or Survivor)

State of _____)

SS:

County of _____)

_____ being duly sworn, deposes
and says the he/she resides at _____, State of
_____, and is the executor/administrator/survivor of
_____ deceased, who died on the
_____ day of _____, 2_____;

that at the time of his/her death the domicile (legal residence) of said deceased was at
_____; County of _____,
State of _____; that this affidavit is made for the purpose
Of inducing First American Stock Transfer 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/Survivor

Sworn to before me this
_____ day of _____, 2_____,
_____,

Notary Public

My Commission expires _____ affix seal