



A BNY MELLON COMPANYSM

AFFIDAVIT OF DOMICILE

Dreyfus Brokerage Services, P.O. Box 9008, Hicksville, NY 11802-9008

NOTE: This Affidavit must be completed and executed in the presence of a Notary.

State of)
:ss.:
County of)

being duly sworn, deposes and says that she/he resides
(Name of Surviving Tenant/Executor/Administrator/Trustee)
at (Street Address and City) State of (State)
and is (If Corporate Fiduciary, State Title of Affiant and Name of Corporation; Otherwise Leave Blank)
Surviving Tenant/Executor/Administrator/Trustee of the Estate of (Name of Decedent), Deceased, who
died at (Street Address, City, State, Zip Code) on the (Date) day of (Month), (Year); that
at the time of her/his death the domicile (legal residence) of decedent was at (Street Address and City),
County of (County), State of (State); that decedent resided at such address for (Number of Years) years, such residence
having commenced on (Month, Date), (Year); that decedent's principal place of business at the time of his/her death
was at (Street Address and City), County of (County), State of (State); that decedent's
most recent Federal income tax return showed her/his legal residence as (Street Address and City),
County of (County), State of (State); and that within three years prior to the death decedent was not a resident of another
State, except as stated:*

Check one box:

- (i) To the best knowledge of affiant, the decedent owned no real or tangible personal property located in New Hampshire at the time of decedent's death; or
(ii) To the best knowledge of affiant, the decedent owned real and/or personal property located in New Hampshire at the time of decedent's death;

Check one box:

- (i) To the best knowledge of affiant, the decedent owned no property subject to the Kentucky inheritance and estate tax at the time of decedent's death; or
(ii) To the best knowledge of affiant, the decedent owned property subject to the Kentucky inheritance and estate tax at the time of decedent's death;

that all debts of and taxes and claims against the decedent's Estate have been paid or provided for, that this affidavit is made for the purpose of securing the transfer or delivery of property owned by decedent at the time of his/her death to a purchaser or the person or persons legally entitled thereto under the laws of decedent's domicile and that any apparent inequality in distribution has been satisfied or provided for out of other assets of the Estate.**

FOR NOTARY PUBLIC USE ONLY:

Sworn to (or affirmed) before me this

day of , 20

(Give official capacity of official administering oath.)

My commission expires

(AFFIX SEAL.)

X SIGNATURE OF NOTARY PUBLIC

X SIGNATURE OF SURVIVING TENANT/EXECUTOR/ADMINISTRATOR/TRUSTEE

*If decedent resided in another State within three years prior to death, set forth the name of the State and facts as to change of residence and establishment of final domicile.

**Delete this paragraph if the transfer is made to an executor, administrator or surviving joint-tenant, or for the purpose of sale.

Please mail this completed form to:
DREYFUS BROKERAGE SERVICES
PO Box 9008
Hicksville, NY 11802

For Registered, Certified or Overnight Mail, please mail to:
DREYFUS BROKERAGE SERVICES
144 Glenn Curtiss Boulevard, 106-9501
Uniondale, NY 11556