

# AFFIDAVIT OF DOMICILE

**STATE OF:**

**COUNTY OF:**

\_\_\_\_\_, being duly sworn, deposes and says: I reside at \_\_\_\_\_ Street, City of \_\_\_\_\_, and am Executor/Administrator/Survivor of \_\_\_\_\_, deceased, who died on the \_\_\_\_\_ day or \_\_\_\_\_, 20\_\_\_\_. At the time of the death the legal residence of said decedent was \_\_\_\_\_ Street, 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 any State (other than that of \_\_\_\_\_  
(State of Incorporation of the Stock.) his/her Domicile) within the United States of America, at the time of death.

\_\_\_\_\_ Shares \_\_\_\_\_ Said security was physically located in the City of \_\_\_\_\_ State of \_\_\_\_\_ at the date of the death of decedent.

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

\_\_\_\_\_

\_\_\_\_\_

(Signature of Deponent)

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

Affix Seal