



AFFIDAVIT OF DOMICILE

Instructions on reverse-side
Please Print Clearly

(TO BE COMPLETED BY EXECUTOR, ADMINISTRATOR, PERSONAL REPRESENTATIVE OR SURVIVOR)

STATE OF (1)

SS:

COUNTY OF (2)

I, (3) being duly sworn, depose and say:

that I reside at (4)

and am the **(circle capacity)** Executor / Administrator / Personal Representative or Survivor of the Estate of:

(5) the deceased owner, who died on

(6)

That at the time of the owner's death, their domicile (**legal residence**) was located at:

(7)

and that this affidavit is made for the purpose of inducing **American Stock Transfer & Trust Company, LLC** as transfer agent to transfer or deliver securities registered in the name of, or owned by said decedent at the time of their death.

(8) SWORN TO BEFORE ME THIS _____ DAY OF _____, 20____

(9) X
Signature(s)
(Survivor, Executor / Administrator OR Personal Representative)
X

X
NOTARY PUBLIC SIGNATURE
MY COMMISSION EXPIRES ON

If not owner, must state capacity

INSTRUCTIONS FOR COMPLETING AFFIDAVIT OF DOMICILE

PLEASE PRINT ALL INFORMATION CLEARLY

- 1.** Enter the State where this Affidavit is completed and sworn to before a Notary.
- 2.** Enter the **County** where this Affidavit is completed and sworn to before a Notary.
- 3.** Enter the **full name of the Executor / Administrator / Personal Representative or Survivor.**
- 4.** Enter the **legal address of the Executor / Administrator / Personal Representative or Survivor.**
- 5.** Enter the **full name of the deceased owner.**
- 6.** Enter the **date of death for the deceased owner.**
- 7.** Enter the **legal residence of the deceased owner.**
- 8.** Official **Notary Public** to complete Certification and affix **Seal.**
- 9.** Enter the signature of the **Executor / Administrator / Personal Representative or Survivor, including capacity.**

Kindly submit your transfer request to the following address:

American Stock Transfer & Trust Company, LLC
Operations Center
Attn.: Transfer Department
6201-15th Avenue
Brooklyn, NY 11219