

State of \_\_\_\_\_

## AFFIDAVIT OF DOMICILE

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I, \_\_\_\_\_, being duly sworn, hereby affirm under penalty of perjury, on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, that I am the: (Check one)

- Executor
- Administrator
- Heir
- Survivor

of the Estate of \_\_\_\_\_ (the "Decedent"). The purpose of this affidavit is to secure the transfer or delivery of securities registered in the name of the Decedent at the time of their death. As exhibits to this affidavit please find a list of the securities owned by the decedent, as well as a Certificate of Death.

The Decedent died on \_\_\_\_\_, 20\_\_\_\_. At the time of death, the Decedent's legal residence was \_\_\_\_\_, \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_ . Decedent lived at this residence for \_\_\_\_\_ years prior to death and was not a resident of any other State within the United States of America at that time. Decedent's social security number is \_\_\_\_\_.

\_\_\_\_\_  
Affiant



**NOTARY ACKNOWLEDGMENT**

State of \_\_\_\_\_ )  
  ) **(Seal)**  
County of \_\_\_\_\_ )

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, by the undersigned, \_\_\_\_\_, who is personally known to me or satisfactorily proven to me  
to be the person whose name is subscribed to the within instrument.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

