

*Regular Mail or Overnight Delivery send to:*

**Issuer Direct Corporation**

**ATTN: Direct Transfer**

**1 Glenwood Ave, Suite 1001**

**Raleigh, NC 27603**

Contact Us at: **919-481-4000 x 3**

[ta@issuereirect.com](mailto:ta@issuereirect.com)

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

County of \_\_\_\_\_

Name of Stock \_\_\_\_\_

Name(s) on Account \_\_\_\_\_

Deceased Holder's Tax Identification Number or Social Security Number \_\_\_\_\_

I/We, the undersigned \_\_\_\_\_, being duly sworn, depose and

Say that (I/we) reside at \_\_\_\_\_ in

the State of \_\_\_\_\_, and am/are \_\_\_\_\_ (describe your status:

Executor, Administrator, Survivor in Joint Tenancy, if a corporate fiduciary show title of affiant and name of corporation) of (the

Estate of) \_\_\_\_\_ who died on the \_\_\_\_\_ day of

\_\_\_\_\_, 20 \_\_\_\_\_, that at the time of death the domicile (legal residency) of said

decendent was at \_\_\_\_\_

County of \_\_\_\_\_, State of \_\_\_\_\_, that

the decendent resided at such address for \_\_\_\_\_ years prior to death and was not a resident of any (other) State within the

United States of America at time of death.

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

\_\_\_\_\_  
SIGNATURE (Executor, Administrator or Survivor)

Sworn to before me, a notary public this

\_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC SIGNATURE

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

