

AFFIDAVIT OF DOMICILE

\_\_\_\_\_, being duly sworn, deposes and says:  
I reside at \_\_\_\_\_, City of \_\_\_\_\_,  
County of \_\_\_\_\_, State of \_\_\_\_\_ and  
am Executor/Administrator/survivor of \_\_\_\_\_,  
deceased, who died on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
At the time of death the legal residence of said decedent was \_\_\_\_\_,  
City of \_\_\_\_\_, County of \_\_\_\_\_, State of \_\_\_\_\_. He/She resided  
in the State of \_\_\_\_\_ for \_\_\_\_\_ years prior to death. That securities were  
physically located in the City of \_\_\_\_\_, State of \_\_\_\_\_ at the date of  
the death of decedent.

\_\_\_\_\_  
Medallion Stamp Signature  
Guarantee

\_\_\_\_\_  
Signature of Deponent