**STATE OF [INSERT STATE]**

**COUNTRY OF [INSERT COUNTRY]**

**IN THE OF [COURT AND JURISDICTION]**

**AFFIDAVIT OF DOMICILE**

I, [INSERT NAME], the undersigned, being duly sworn, hereby affirm under penalty of perjury, on the [INSERT DATE], that I am the [Executor] OR [Administrator] OR [Heir] OR [Survivor] of the Estate of [INSERT DECEDENT NAME] (the “Decedent”):

1. 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.
2. This affidavit is accompanied by a list of the securities owned by the Decedent and a Certificate of Death.
3. The Decedent, [INSERT DECEDENT NAME] died on the [INSERT DEATH NAME].
4. The place of death was [INSERT DATE].
5. At the time of the death, the Decedents legal residence was [INSERT COUNTRY] of state of [INSERT STATE].
6. The Decedent lived there for [INSERT TIME FRAME] prior to their death and was not a resident of any other State within the USA at that time.
7. The Decedents social security number is [INSERT SOCIAL SECURITY NUMBER].

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**

**Printed name:**

**Date:**

**NOTARY OF ACKNOWLEDGEMENT**

State of: [INSERT STATE]

Country of: [INSERT COUNTRY] (**Seal**)

This Affidavit of Domicile was acknowledged on the [INSERT DATE] by the undersigned, [INSERT UNDERSIGNED NAME], who has satisfactorily proven to me to be the person whose name is subscribed to this document.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Notary Public**

**My Commission Expires on the:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_