

Account Number: -

Morton Clarke

520 Pike Street Suite 2250
Seattle, WA 98101-4013

AFFIDAVIT OF DOMICILE/RESIDENCY

State of _____

County of _____

The undersigned, _____ residing at
(processor)

(address)

being duly sworn, deposes and says that I am _____
(executor/administrator)

of (the estate of) _____
(deceased name)

who died on _____ that at the time of death the domicile
(date)

(legal residence) of said decedent was at _____
(address)

_____ and that she/he resided in the

State of _____ for _____ years prior to death and was

not a resident of any (other) state within the United States of America at the time of

death.

Signature _____

Sworn to before me a notary public this

Notarial Seal

_____ day of _____, 20 _____

Signature of Notary Public

My commission expires _____