BNY Brokerage Services P.O. Box 9008 Hicksville, NY 11802-9008

If you have any questions please call a BNY Brokerage Account Representative at 1-800-843-5466.

MAIL LOSS AFFIDAVITS			
		Mailed by: (Sender)	
		Place of Mailing:	
<u> </u>		Mailed to: (Addressee)	
S OF SHIPMENT		Certificate or Bond No.(s) and Number of Shares or Principal Amount of Bonds and/or Coupons:	
DETAILS		Corporation or issuer:	
		Class of Stock or Description of Issue:	
		Registered in Name of:	
		If Endorsed, indicate Here:	
		STATE OF:	
AFFIDAVIT OF MAILING		COUNTY OF:	
		The undersigned, deponent, being first duly sworn, deposes and says that in accordance with the records of the above named Sender, the above described securities were forwarded by United States Mail on the date specified in a postpaid envelope addressed to the above named Addressee. The said Addressee has reported the non-delivery of the said securities. The securities have not been returned to the above named Sender and they are believed to have been lost or destroyed in the mails.	
/IT OF		Deponent agrees on behalf of above named Sender that if the securities should ever come into their hands, custody or power, deponent will immediately surrender the original securities for cancellation.	
DAV		Indicate here whether deponent is an officer, partner or employee of Sender.	Deponent's Signature
AFF		employee of Sender.	Deponent's address
		Subscribed and Sworn to before me this day of 20	Notary Public(Indicate date commission expires)
AFFIDAVIT OF NON-RECEIPT		STATE OF:	
		COUNTY OF:	
		The undersigned deponent(s), being first duly sworn depose(s) and say(s) that the above described securities have never been received by the above named Addressee or any person or persons acting on (its) (his) (her) (their) behalf. Deponent(s) agree(s) (on behalf of the above named Addressee) that if the securities should ever come into (its) (his) (her) (their) custody or power, deponent(s) will immediately notify the above named Sender and will surrender the original securities for cancellation.	
		If Addressee is a firm or corporation indicate here whether officer, partner or employee.	Deponent(s) Signature(s)  Deponent(s) address
		\	Depondings) address
FFI		(If more than one addressee or registered owner, all must sign)	Notary Public
⋖		Subscribed and Sworn to before me this day of 20	Notary Public(Indicate date commission expires)

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