

MAIL LOSS AFFIDAVITS

DETAILS OF SHIPMENT

Mailed by:
(Sender)

Place of
Mailing:

Mailed to:
(Addressee)

Certificate or Bond
No.(s) and Number of
Shares or Principal
Amount of Bonds
and/or Coupons:

Corporation
or issuer:

Class of Stock or
Description of Issue:

Registered in
Name of:

If Endorsed,
indicate Here:

AFFIDAVIT OF MAILING

STATE OF:

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.

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.

Indicate here whether deponent is an officer, partner or
employee of Sender.

Deponent's Signature _____

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 _____

(If more than one addressee or registered owner, all must sign)

Subscribed and Sworn to before me this day of 20

Notary Public _____
(Indicate date commission expires)