

AFFIDAVIT OF DOMICILE

MERRILL LYNCH
ACCOUNT NUMBER _____

I, _____ being duly sworn, depose and state as follows:
Affiant (Your Name. If a Corporate Fiduciary, Show Name & Title of Individual Signing, & Name and Address of Corporation)

I reside at _____ (street address), City of _____,
County of _____, State of _____, and am

Please check one:

executor **personal representative** **administrator** **survivor of joint tenancy** **heir at law**

of _____ (deceased) who died on ____ day of _____, 20____.
(day) (Month) (Year)

At the time of death, the decedent's residence and domicile (legal residence) was in the City of _____,
County of _____, and State of _____;

and had been the same for the preceding _____ years. The decedent's last Federal income tax return showed
the decedent's residence and domicile was in the City of _____,
County of _____, and State of _____.

The decedent last voted in the City of _____, and State of _____.

The decedent was not at any time during the year preceding the date of death a resident of or domiciled in any state within the
United States of America other than the state of domicile shown above. The decedent executed no will or instrument within three
years prior to death in which the decedent stated he /she was a resident of any other State.

This affidavit is made for the purpose of securing the transfer or delivery of property owned by the decedent at the time of his or
her death to a purchaser or persons legally entitled thereto under the laws of the decedent's domicile.

Signature of Affiant

Date

Note: CALIFORNIA-LICENSED NOTARIES

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the documents to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Notarization is Required

State of _____ County of _____

Subscribed and sworn to (or affirmed) before me this _____ day of _____, 20____,
(day) (month) (year)

by _____, proved to me on the basis of satisfactory

(Name of Affiant)
evidence to be the person(s) who appeared before me.

Signature of Notary Public

(Affix Seal or Stamp)

Print Name of Notary Public

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____