

**Mail Loss Affidavit: Manhattan Transfer Registrar Company**

DETAILS OF MAILING

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 the 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 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 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 deposes and say(s) that the above described securities have never been received by the above named Addressee or any person or persons acting on (it(s) (his) (her) (their) behalf. Deponent(s) agree(s) (on behalf of the above named addressee) that the securities should ever come into (its) (his) (her) (their) custody or power, deponent(s) will immediately notify the above 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)