



REQUEST FOR AFFIDAVIT RE-LOST STOCK

DATE _____

SHAREHOLDER(S) _____

PROPERTY ADDRESS _____

PLEDGEE _____

IF AVAILABLE Certificate Numbers: _____ Shares _____

AFFIDAVIT RE-LOST STOCK TO BE SIGNED BY: Seller/Buyer _____

MAIL TO: _____

ESCROW #: _____

ATTENTION: _____

REQUESTED BY: _____

FEE FOR EACH GENERAL AFFIDAVIT REQUESTED \$ 25.00

PROMISE TO PAY AT CLOSE OF ESCROW.

WE HEREBY CERTIFY THAT EVERY EFFORT HAS BEEN MADE TO LOCATE THE ORIGINAL CERTIFICATE.

ESCROW OFFICER

SUNNY SLOPE WATER COMPANY USE ONLY

RECEIPT # _____ DATE RECEIVED _____

PLEASE SIGN AND RETURN

PLEASE MAIL CALL US FOR MESSENGER PICK UP