Count	) ) ss. y/District )			
(	GIFT OF SHAR	RES AFFIDAVIT		
,		; first duly sworn po	er law, depose an	d declar
1) My social Security	number is	//		
2) My birth date is	//	and I attest that	I am at least 18	years o
3) I am a shareholder make this gift, I hol	d sł	nares of stock in SN	IA	
My complete address is: City:		State	# Zip	
Phone #()				
			the named	

6) I understand that my gift gives to the recipient all authority to transfer these shares by will or gift; that I will no longer have voting rights for these shares; and that I will no longer receive dividends or distributions for these shares.

taxes will be either my responsibility as donor or recipients responsibility.

Association will not be responsible for payment, and that payment of any such

7) I understand that by signing this affidavit, I am swearing under oath to the best of my knowledge and belief that everything stated here is true, and I am acting of my own free will and am not under any undue pressure, influence or duress.

- 8) I affirm that I have not received anything of value nor was I promised anything of value as compensation or payment for the stick I wish to transfer.
- 9) I give a total of \_\_\_\_\_\_ shares of my stock to be divided among the following recipient(s) as stated under each recipient.

The following persons names of persons to receive stock shares pursuant to 43 U.S.C. 1606 (h) (C) (iii); is a Native\* or the descendant of a Native\* within the meaning of ANCSA;

Information About <u><i>Person(s)</i></u> The			<u>Shares</u> :	
	***********************	****		
1. /	/			
Recipients First Name	Middle	Las	Last Name	
As appears on social security car	ď			
Relationship to Donor (You must				
□ Child □ Grandchild □ Gre	at-Grandchild□ Brother	🗆 Sister 🗖 Nephe	ew 🗆 Niece	
The parents	and			
(Mother's full name	e) (Father	's full name)		
Degree of blood Native C	Drigin: Aleut <u>Eski</u>	mo <u>Indiar</u>	1	
<b>Recipients complete Mailing add</b>	ress			
Address:	City	State	Zip	
Date of Birth: / /	Social security #:			
Number of shares	to be gifted to this per	rson		
Shareholder (Donor) Must Sig	gn in the Presence of a	a Notary Public		

**DATED** this \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_\_.

## SHAREHOLDER SIGNATURE

SUBSCRIBED & SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**NOTARY PUBLIC Notary Public in and for the state of** \_\_\_\_\_\_ "My Commission expires":

ANCSA defines a Native as a person of at least one-quarter Native blood or who was enrolled by the Secretary of the Interior pursuant to ANCSA. ANCSA defines a descendant of an AK Native

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