

APPLICATION FOR TRANSFER OF SHARES
OF HUNA TOTEM CORPORATION STOCK
ON DEATH OF HOLDER

Please complete this form as accurately and thoroughly as possible. Include the names of all deceased family members and dates of death. (Please print.)

1. Name of Applicant _____ Blood Quantum _____
Street or P.O. Box _____
City, State, Zip _____
Telephone # (Home) _____ (Work) _____
Your Relationship to the Deceased _____

2. Name of Deceased _____
Date of Death _____ Birth date _____
Residence Address _____

3. Name of Surviving Spouse of Deceased _____
Address _____
Telephone #(Home) _____ (Work) _____
Birth date _____ Social Security Number _____
Blood Quantum _____
Year Deceased Married Surviving Spouse _____

4. Children of Deceased (List all natural children, including children from previous marriage(s) and blood quantum [BQ]; also list any children that may be deceased, and include the date of death [DOD]).

Name	Address	Birth date	DOD	BQ
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4A. If any of the above-listed deceased children left children, please list names, addresses, birth dates [DOB], blood quantum [BQ], and legal guardians if applicable.

DOB: BQ: DOB: BQ:

5. Children Adopted by the Deceased. (List all children, who were legally adopted by the deceased. Also list birth dates [DOB], if living, or date of death [DOD] if not living, and blood quantum [BQ].)

<u>Name</u>	<u>Address</u>	<u>DOB</u>	<u>DOD</u>	<u>BQ</u>
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6. Children Adopted Out. (List all of the deceased's natural children who were legally adopted out from the deceased.) Please include date of adoption, birth date or DOD, and blood quantum:

7. Parents of Deceased. Please list birth dates and social security numbers [SSN], if living, or date of death [DOD], and blood quantum.

Name _____ Name _____
Address _____ Address _____

Birth date _____ Birth date _____
or DOD _____ BQ _____ or DOD _____ BQ _____
SSN _____ SSN _____

8. Brothers and Sisters of Deceased. Please list birth dates and social security numbers [SSN], if living, or date of death [DOD] and BQ.

<u>Name</u>	<u>Address</u>	<u>Birth date</u>	<u>DOD</u>	<u>SSN</u>	<u>BQ</u>
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9. If any of the Deceased's brothers and/or sisters are deceased but had children, list those children.

<u>Name</u>	<u>Address</u>	<u>DOB</u>	<u>SSN</u>	<u>BQ</u>	<u>Child of:</u>
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10. Deceased* did ___ did not ___ leave a Huna Totem Testamentary Disposition.
(In other words, did they sign the back of their Huna Totem stock certificate willing their shares to someone and have it notarized?)

11. Deceased * did ___ did not ___ leave a general Last Will and Testament.

YOUR SIGNATURE _____ DATE _____

PLEASE RETURN THIS FORM ALONG WITH DECEDENT'S DEATH CERTIFICATE, STOCK CERTIFICATE, LAST WILL AND TESTAMENT OR ANY OTHER PERTINENT DOCUMENTS, WHICH WILL BE HELPFUL IN ASSISTING HUNA TOTEM, TRANSFER THE SHARES TO THE HEIRS.

*If the deceased executed any type of will, please provide Huna Totem with a copy when returning this form.

Initial: _____ Date: _____