

## Instructions to Transfer Stock

*Stock Transfer Agent*

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### Presenter Basics

Date:	Email:
Presenter:	Address:
Phone:	City, State, Zip:
Signature:	Country:

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### Transfer Type (Check all that apply)

<input type="checkbox"/> Transfer	<input type="checkbox"/> Stock Split / Issuer Name Change Exchange
<input type="checkbox"/> Legend Removal	<input type="checkbox"/> Non-Insider Shares
<input type="checkbox"/> Rush Process	<input type="checkbox"/> Insider/Control Shares

### Select Reason For Transfer

Gift     
  Sale     
  Other \_\_\_\_\_

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### Certificates Presented (Attach additional sheet if necessary)

Certificate Numbers: \_\_\_\_\_

### Certificates Requested (Attach additional sheet if necessary)

Shareholder Name	Certificate Numbers*	Number of Shares	Existing Shareholder? Skip this part. Address	Tax ID

\*If you would like book entry shares instead of physical certificates, indicate "BOOK" under Certificate Denomination.

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### Certificate Delivery Instructions

Recipient Name : \_\_\_\_\_  
 Address (No P.O. Boxes) : \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ Phone : \_\_\_\_\_  
 Delivery Method (Select One) :     
  FedEx     
  UPS     
  Hand Pickup  
 If Courier Delivery, please provide :     
 \_\_\_\_\_ FedEx/UPS Account Number : \_\_\_\_\_  
 (Please Select Once)     
  Prepaid Waybill     
  Additional \$35 Shipping Fee

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### Enclosed Documents

Physical Certificates     
 \_\_\_\_\_ Transfer Fees

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*IF TRANSFERRING STOCK:*

Stock Power with Medallion Guarantee     
 \_\_\_\_\_ Gift Letter If Applicable

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*IF REMOVING LEGEND:*

Seller's Representation Letter     
 \_\_\_\_\_ Legal Opinion  
 Other (Please Specify): \_\_\_\_\_

SEND YOUR TRANSFER PACKAGE TO CLEARTRUST, LLC  
 17961 HUNTING BOW CIR., UNIT 102, LUTZ, FL 33558

Send this form to [inbox@cleartrusttransfer.com](mailto:inbox@cleartrusttransfer.com)



# Loss

## Affidavit of Loss and Indemnity Agreement

Use this form to report a certificate lost, stolen, or permanently damaged.

Registration Name	
Social Security or Tax ID Number	
Phone Number	
E-Mail Address	
Mailing Address	
<b>Description of Lost Security:</b>	
Certificate Number	Number of Shares
Issuer	Issue Date
State of Incorporation of Issuer	Restriction on Shares (if any)
Type of Loss: (check one) <input type="checkbox"/> Loss <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed	

\_\_\_\_\_ (hereinafter called "Deponent"), who is of legal age, being duly sworn and agrees:

1. The Deponent resides at the address stated above and is entitled to the possession of and is the legal beneficial owner of the security stated above. 2. The original certificate was acquired by the Deponent on \_\_\_\_\_ and lost, stolen, or permanently damaged on \_\_\_\_\_.
3. The certificate \_\_\_\_\_ was \_\_\_\_\_ was not (check one) pledged and/or endorsed at the time of loss or destruction. 4. Deponent has made diligent search for the original certificate and has been unable to find or recover the security. The Deponent has not sold, assigned, or transferred the shares represented by the certificate under any agreement, and has not signed a Power of Attorney or other authorization respecting the same except as stated above. 5. The Deponent hereby requests that a stop transfer be placed on the certificate, and that the transfer agent and issuer refuse to transfer the certificate if it is redeemed for any action by any party other than the Deponent; and that the transfer agent replace the certificate.

Send this form to [inbox@cleartrusttransfer.com](mailto:inbox@cleartrusttransfer.com)

6. To induce the transfer agent and issuer to effect the Deponent's request, the Deponent assigns the transfer agent, issuer, their respective legal representatives, and their successors harmless for any and all loss, damage, expense or liability related to the original certificate and/or its replacement.

7. If the Deponent recovers the original stock certificate, the Deponent shall immediately return the certificate to the transfer agent for prompt cancellation if the certificate has since been replaced, or shall immediately notify the transfer agent in writing that the certificate is recovered if the original has not been replaced by that time.

Printed Name
Signature
Date

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On the \_\_\_\_ of \_\_\_\_, 20 \_\_\_\_, before me,

\_\_\_\_\_

Notary Public, personally appeared \_\_\_\_\_  
personally known to me or proven to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity on behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal

\_\_\_\_\_, Notary Public

My Commission Expires \_\_\_\_\_

Named Printed \_\_\_\_\_

Signature Date \_\_\_\_\_