



# TYONEK NATIVE CORPORATION

1689 C Street, Suite 219  
Anchorage, Alaska 99501-5131  
Tel: (907) 272-0707  
Fax: (907) 274-7125

## TESTAMENTARY DISPOSITION

I, \_\_\_\_\_, devise and bequeath all my shares of stock in Tyonek Native Corporation that I own or am entitled to:

*Note: Please circle shares or %.*

To: \_\_\_\_\_ DOB: \_\_\_\_\_ I leave \_\_\_\_\_ shares or %  
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In the event any person named above dies before me, I want that person's portion of stock to pass as follows:

\_\_\_ To the other beneficiaries named above in equal portions. (if there is only one survivor, to survivor in full.)

\_\_\_ To that person's own children

\_\_\_ To the following beneficiary(ies): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

If listing a minor(s) as a beneficiary, please appoint a person to be custodian of the minor(s)' inherited shares, listed above, until said minor(s) is of age.

Custodian name: \_\_\_\_\_ Phone number \_\_\_\_\_  
 Custodian SSN: \_\_\_\_\_ Relationship to minor/s: \_\_\_\_\_

This instrument shall be governed by and construed in accordance with the laws of the State of Alaska.

I, \_\_\_\_\_, the testator, sign my name to this instrument and declare that I sign and execute this instrument as my Testamentary Disposition and that I sign it willingly (or willingly direct another to sign for me), that I execute it as my free and voluntary act for the purposes expressed in it, and that I am 18 years of age or older, of sound mind, and under no constraint or undue influence.

\_\_\_\_\_  
Date Testator/Testatrix (Signature)

We, the witnesses, sign our names to this instrument, and declare that the testator signs and executes this instrument as his/her last will and that s/he signs it willingly (or willingly directs another person to sign for him/her), and that each of us in the presence and hearing of the testator, signs this Testamentary Disposition as witness of the testator's signing, and that to the best of our knowledge the testator is 18 years of age or older, of sound mind, and under no constraint or undue influence.

\_\_\_\_\_  
Witness (Signature) Witness (Signature)

Residing at: \_\_\_\_\_ Residing at: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

State of Alaska  
Third Judicial District

Subscribed, sworn to, and acknowledged before me by \_\_\_\_\_, the testator, and  
 subscribed and sworn to, before me by \_\_\_\_\_ and \_\_\_\_\_,  
 witnesses, this \_\_\_ day of \_\_\_\_\_, 20\_\_\_.

\_\_\_\_\_  
Notary Public in and for \_\_\_\_\_  
 My Commission Expires: \_\_\_\_\_