GOVERNMENT OF THE UNITED STATES VIRGIN ISLANDS OFFICE OF THE LIEUTENANT GOVERNOR DIVISION OF BANKING, INSURANCE AND FINANCIAL REGULATION

AFFIDAVIT OF LOST INSTRUMENT

(Power Of Attorney)

I, _____, after being first duly sworn, depose and state that: I am the Attorney-in-Fact for _____ 1. having been appointed pursuant to the attached copy of a Power of Attorney dated 2. To my knowledge, my appointment has not been revoked. 3. _____ is/are the record owner of a ______ (account type) account, maintained at _____ (name of institution) with a balance of \$_____. 4. Said account was presumed abandoned, and upon information and belief, is being held in trust by the Administrator. 5. After due diligence, I have not been able to locate the passbook or other instrument for said account. 6. I request that the Administrator pay the amount held in trust to I agree to be responsible and indemnify the Administrator for any and all losses that 7. the Administrator may sustain from any claims arising from the Administrator's reliance on this Affidavit. I further agree to repay any such claim together with the Administrator's costs and expenses. 8. This Affidavit shall be binding on my heirs, executors, and administrators and assigns. Attorney-in-Fact for Owner Subscribed and sworn to before me this _____ day of _____, 20____.

Notary Public

NP#_____ Expires:_____