



# AZACHOROK INC. STOCK WILL (AS 13.16.705(b))

**IMPORTANT NOTE:** Azachorok shareholders are encouraged to execute an Azachorok Stock Will. Remember to update your Azachorok Will upon the death of a designated beneficiary, after giving or receiving a gift of stock, if additional shares are inherited or if life changes occur, including marriage, divorce or the birth or adoption of children.

I, \_\_\_\_\_ (**testator**), devise and bequeath all my shares of stock in Azachorok, Inc. (Azachorok) that I own or am entitled to receive as stipulated below. **I understand that Azachorok does not allow share fractions or single shares to be divided.** I further understand and agree that if following the transfer instructions below would result in dividing a share fraction or single share, Azachorok shall follow its allocation of shares procedure to determine ownership of any share fraction or single share that would have otherwise been divided.

<b>A</b>	<b>Full Legal Name(s) of Primary Beneficiary(ies)</b>	<b>Exact Number of Shares</b>
	• <b>Print the full name(s) of the beneficiary(ies) you wish to inherit your Azachorok stock.</b>	• <b>Direct any existing share fraction to ONE beneficiary.</b>
		• <b>Single shares may not be divided.</b>
	_____	⇒
	_____	⇒
	_____	⇒
	_____	⇒
	_____	⇒

**TOTAL OF ABOVE SHARES** (verify that the total equals exact number of shares owned): \_\_\_\_\_

**B** **Alternate Beneficiary(ies)** In the event any beneficiary named in Part A dies before me, I want that beneficiary's portion of stock to pass as follows:

<b>INITIAL ONLY ONE</b>	}	_____ To the other beneficiaries named in Part A in the same proportion as above, <b>OR</b>	}	If there is only one survivor, to the survivor in full.
		_____ To the other beneficiaries named in Part A in equal portions, <b>OR</b>		
		_____ To that person's own children, <b>OR</b>		
		_____ To the following beneficiary(ies): _____		

**C** **Custodian(s)** Complete Part C only if someone named in Part A or Part B is a minor (under 18 years of age). Appoint **ONE** adult custodian for each minor by printing the custodian's name next to each and every minor, even if naming the same custodian.

I appoint the following individual(s) as custodian(s) of the Azachorok stock for the named minor(s) as required by the Alaska Uniform Transfers to Minors Act. (AS 13.46.085):

<b>Name of Minor Beneficiary (from Part A or B)</b>	<b>Name of Custodian for that Minor Beneficiary</b>
_____	⇒
_____	⇒
_____	⇒
_____	⇒
_____	⇒
_____	⇒

**D** **Testator's (Your) Initials:** \_\_\_\_\_

**AZACHOROK INC. STOCK WILL  
(AS 13.16.705(b))**

**E** 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 at \_\_\_\_\_ (city), \_\_\_\_\_ (state), and declare that I sign and execute this instrument as my last Azachorok Stock Will 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.

**STOP! Sign and date this Azachorok Stock Will in front of two witnesses and a notary public.**

\_\_\_\_\_  
**Your Signature**

\_\_\_\_\_  
**Date**

**F** **WITNESSES:** We, the witnesses, sign our names to this instrument, and declare that the testator signs and executes this instrument as his/her last Azachorok Stock Will and that he/she 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 Azachorok Stock Will 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.

**STOP! Sign and date this Azachorok Stock Will in front of a notary public.**

\_\_\_\_\_  
**Signature of First Witness**

\_\_\_\_\_  
**Signature of Second Witness**

\_\_\_\_\_  
**Printed Name of First Witness**

\_\_\_\_\_  
**Printed Name of Second Witness**

\_\_\_\_\_  
**Address of First Witness**

\_\_\_\_\_  
**Address of Second Witness**

**G** **THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC**  
**Attn. Notary: Please have the testator and two witnesses sign in your presence. Verify that the date you sign this Azachorok Stock Will is the same date the testator signs and dates this form.**

State of: \_\_\_\_\_

County of: \_\_\_\_\_ (or \_\_\_\_\_ Judicial District)

Subscribed, sworn to, and acknowledged before me by \_\_\_\_\_,  
(Print the name of the **testator**)

the testator, and subscribed and sworn to before me by \_\_\_\_\_ and  
(Print the name of the **first witness**)

\_\_\_\_\_, witnesses, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.  
(Print the name of the **second witness**)

\_\_\_\_\_  
**Notary's Signature**

Notary Public in and for: \_\_\_\_\_

My commission expires: \_\_\_\_\_