



Virtus Mutual Funds
 PO Box 534470
 Pittsburgh, PA 15253-4470

Affidavit of Domicile

For assistance, please contact us at 800-243-1574 or visit our website at Virtus.com

1. Account Information

Shareholder Name/Registration _____

U.S. Social Security Number _____

Fund and Account Number(s) _____

2. Affidavit of Domicile

Virtus Investment Partners, Inc., is incorporated in the state of Delaware.

The following is an affidavit of decedent's legal residence at time of death to be filed by the beneficiary, surviving spouse, executor, administrator, personal representative, or legal representative for the estate. You may also be required to provide an Inheritance Tax Waiver. Check with the decedent's state of legal residency at the time of death for requirements.

STATE OF _____)

SS:

COUNTY OF _____)

I, _____ being duly sworn, depose and state as follows:
Affiant (Your Name)

I reside at _____,
(Street address)

City of _____, County of _____

State of _____, and am the (Please check one):

- beneficiary
- surviving spouse
- executor
- administrator
- personal representative
- legal representative

of (deceased) _____ who died on day of _____, _____, 20_____.
(Name of decedent) (day) (month) (year)

At the time of death, the decedent's legal residence (domicile) was in the

City of _____, County of _____

State of _____, and had been the same for the last _____ preceding years.

If the decedent resided in another state within three years prior to their death, provide the previous residence and domicile below.

City of _____, County of _____

State of _____.

This Affidavit is for the purpose of securing the transfer or delivery of the above-referenced account owned by the decedent at the time of his or her death to the person(s) legally entitled thereto under the laws of state(s) of the decedent's domicile(s).

Signature of Affiant

(Notary Seal)

Subscribed and sworn to before me

This _____ day of _____, 20_____

 (Notary Public)

My commission Expires _____