

# LIST OF TRUST COMPANY STOCKHOLDERS

OF \_\_\_\_\_

IN \_\_\_\_\_, IN THE COUNTY OF \_\_\_\_\_

STATE OF OKLAHOMA, AS SHOWN BY THE STOCKHOLDERS' RECORD ON THE \_\_\_\_\_  
(First - Fourth)

IN \_\_\_\_\_, \_\_\_\_\_.  
(Day of Week) (Month) (Year)

DATE OF ANNUAL MEETING \_\_\_\_\_.

PRINTED NAME	CITY OF RESIDENCE	NO. OF SHARES
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\* Attach additional pages if necessary

**TOTAL** \_\_\_\_\_

STATE OF OKLAHOMA )  
COUNTY OF \_\_\_\_\_ ) ss.

I, \_\_\_\_\_ President/Cashier/Secretary of the above named institution, do hereby certify that the above is a full and correct list of the names and residences of the stockholders of said institution, together with the amount of stock held by each.

\_\_\_\_\_  
President/Secretary/Cashier

Signed and attested before the undersigned on \_\_\_\_\_ by \_\_\_\_\_,  
as \_\_\_\_\_, of the above-named institution.

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

(Seal)

\_\_\_\_\_  
Notary