



CERT# _____ # OF SHARES _____

OLGOONIK CORPORATION TESTAMENTARY DISPOSITION FORM (STOCK WILL)

1. TESTAMENTARY DISPOSITION

Number of shares this form pertains to: _____

UPON MY DEATH, I give, devise and bequeath the shares of stock represented by the Certificate number: _____ to the following person(s) in the amount(s) set forth:

**OC does not issue fractional shares of stock.*

NAME OF PERSON(S)	CURRENT ADDRESS	# OF SHARES TO BE RECEIVED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

This Testamentary Disposition is made under the provisions of Alaska Statutes 13.16.705 and Section 7(h)(2) of the Alaska Native Claims Settlement Act of 1971, 85 Stat. 688.

DATED: _____
(SIGNATURE OF STOCKHOLDER)

STATE OF _____)
_____) ss.
_____ JUDICIAL DISTRICT)

THIS IS TO CERTIFY that on the _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the State of _____, duly commissioned and sworn, personally appeared _____ to me known and known to me to be the identical individual described above, and acknowledged that he/she signed the same freely and voluntarily for the uses and purposes therein mentioned.

GIVEN UNDER MY HAND and official seal the day and year last above written.

NOTARY PUBLIC for _____
My Commission Expires: _____



CERT# _____ # OF SHARES _____

2. REVOCATION OF TESTAMENTARY DISPOSITION

Number of shares this form pertains to: _____

I hereby revoke and cancel the above-executed Testamentary Disposition.

DATED: _____

_____ (SIGNATURE OF STOCKHOLDER)

Instead, UPON MY DEATH, I give, devise and bequeath the shares of stock represented by this Certificate to the following person(s) in the amount(s) set forth:

**OC does not issue fractional shares of stock.*

NAME OF PERSON(S)	CURRENT ADDRESS	# OF SHARES TO BE RECEIVED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

This Testamentary Disposition is made under the provisions of Alaska Statutes 13.16.705 and Section 7(h)(2) of the Alaska Native Claims Settlement Act of 1971, 85 Stat. 688.

DATED: _____

_____ (SIGNATURE OF STOCKHOLDER)

STATE OF _____)

) ss.

_____ JUDICIAL DISTRICT)

THIS IS TO CERTIFY that on the _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the State of _____, duly commissioned and sworn, personally appeared _____ to me known and known to me to be the identical individual described above, and acknowledged that he/she signed the same freely and voluntarily for the uses and purposes therein mentioned.

GIVEN UNDER MY HAND and official seal the day and year last above written.

NOTARY PUBLIC for _____
My Commission Expires: _____