## Ahtna, Incorporated TESTAMENTARY DISPOSITION

I		n accordance wit			•		
	the following p	rated. Upon my ersons or entities					
I own shares in	the following cl	asses in the amo	unt of shares	shown:			
Class A1		Class		Class			
PART A							
Name		Address		Class A1	Clas	SS	Class
you may do so  1. If, at the tin and have r leave the extended in the people of the following like the follo	if you wish:  ne of death, I had not yet complete of the compl		e shares tha mentary Disp ly one box, and same portion art A, (above ss) dopted by me	n those given the nd initial the as the share)  be before or a	en out in the additi box you es willed	Part A, ional sl check). there.	, above, hares, I

2.	If other children are born to or adopted by me after the date of this Testamentary Disposition, I wish for them to be included in as nearly equal shares as possible with those persons listed in Part A, above. Yes $\square$ or No $\square$ (If neither box is checked, Ahtna will presume the answer is "yes")
3.	If any of the people named in Part A should pre-decease me, I leave the shares that are willed to that person as follows: (check only one box, and initial the box you check)
	To that person's heirs by law.  To the surviving people listed in Part A in the same proportion as the shares willed there.  In equal number to those people listed in Part A.  All to the following person:
	Name and Address
	To my heirs by law. Otherwise, as follows: (name and address)
<u>PA</u>	RT C
•	on my death, if I am eligible for any memorial fund donation authorized by the Ahtna Board of ectors, I name my personal representative as:
or .	
	my alternate representative. My representative understands that these funds are intended for senses related to my death.
<u>PA</u>	RT D

Upon my death, if I have acquired acreage in accordance with the Ahtna merger land use program, I direct that such lands be distributed to my heirs in accordance with the disposition of the eligible village shares in Part A of this Testamentary Disposition.

DATED this	day of	······································
		Signature of Owner (Must be identical to name on certificate)
NOTARY BLOCK (to	be completed by a Nota	ary Public)
STATE OF JUDIC	) ) ss. CIAL DISTRICT )	
be the person whose foregoing Testamenta	e name appears above	before me, the to me known to as Owner and to be the person who signed to nowledged to me that it was freely and voluntarily cribed.
WITNESS my hand a	nd official seal the day a	and year first above written.
		Notary Public in & for the State of My Commission Expires: