

Delaware Claims Processing Facility

NORTH AMERICAN REFRACTORIES COMPANY ASBESTOS PERSONAL INJURY SETTLEMENT TRUST ("the NARCO TRUST")

Unsigned Deposition Affirmation

Claimant Name: _____

Claim ID: _____

Law Firm (If any): _____

I, _____, affirm that the copy of the deposition provided as supporting documentation for the above claim, although not signed by the court reporter, is a true, correct and authentic document.

Attorney Signature

Date

Printed or typed name