

Capital Electric Cooperative Inc. Capital Credit Estate Retirement

COMPLETE ONLY ONE PAGE/SIDE OF THIS FORM

Estate **WITHOUT** a Personal Representative (completed below, this page/side only)

Estate **WITH** a Personal Representative (STOP, complete other page/side of form)

_____ Name of the deceased
_____/_____/_____ Date of Death
_____-_____-_____ SSN of Deceased

Name of Successor (Please Print)

Successor claims entitlement to the property because:

- I am the surviving spouse
- I am the heir at law
- Other (please specify)

Successor Election (Choose only one option):

- Retire all unretired capital credits for a discounted present value payment. The unretired amount is presently \$_____ and the present value to be paid is \$_____. No additional capital credits will be allocated or paid to the decedent.

OR

- Assign the decedent's unretired capital credits to the party listed below. This party will receive payments as retirements are authorized by the Cooperative's Board of Directors.

Successor attests the following:

- 1) No personal representative has been appointed.
- 2) No application or petition for appointment of a personal representative is pending or anticipated.
- 3) The value of the entire estate does not exceed \$50,000.00 (in accordance with NDCC Chapter 30.1-23)
- 4) Capital Electric Cooperative is discharged and released to the same extent as if the Cooperative dealt with a personal representative of the decedent. I am answerable and accountable to any personal representative or to any other person having a superior right.

Make present or future checks payable to:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

SSN# or EIN#: _____

Signature: _____
(in the presence of a notary)

Date signed: _____

Notary Signature: _____

Signed before me on: _____
(Date)

In the county of _____ in the state of _____

My commission expires: _____

Seal:

Capital Electric Cooperative Inc. Capital Credit Estate Retirement

COMPLETE ONLY ONE PAGE/SIDE OF THIS FORM

- Estate **WITH** a Personal Representative (completed below, this page/side only)
- Estate **WITHOUT** a Personal Representative (STOP, complete other page/side of form)

<hr/> <p>Name of the deceased</p> <hr/> <p>____/____/____</p> <p>Date of Death</p> <hr/> <p>- -</p> <p>SSN of Deceased</p>

Make present or future checks payable to:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

SSN# or EIN#: _____

Signature: _____
(Personal Representative)

Date signed: _____

Name of Personal Representative (Please Print)

This form represents a request for assignment or payment of unretired capital credits due the decedent

Election of Personal Representative (Choose only one option):

Retire all unretired capital credits for a discounted present value payment. The unretired amount is presently \$_____ and the present value to be paid is \$_____. No additional capital credits will be allocated or paid to the decedent.

OR

Assign the decedent's unretired capital credits to the party listed below. This party will receive payments as retirements are authorized by the Cooperative's Board of Directors.

*****A copy of the Letters Testamentary or Letters of Administration for the estate of the decedent must be submitted before this form will be processed*****