

UNITED ELECTRIC COOPERATIVE INC.
APPLICATION FOR PAYMENT OF CAPITAL CREDITS
TO DECEASED PATRON'S ESTATE

MEMBERSHIP # _____

We, (whether one or more), the undersigned, state that _____

Died on or about the _____, and that we are the legal representative(s) of
said decedent's estate by virtue of the following:

_____ Personal Representative _____ Spouse _____ Next of Kin

I/We do hereby request said United Electric Cooperative, Inc., to pay out the decedent's Capital Credits to the persons, who are entitled to the same, in accordance with the option hereinafter checked:

_____ GENERAL RETIREMENT – The assigned capital credits from _____ through _____, a total of \$ _____, would be refunded in accordance with policies of general application in effect at the time the refund is made to the person(s) designated. If the Board of Directors determines that a future retirement of capital credits will not jeopardize the financial condition of the Cooperative, they may authorize a retirement.

_____ DISCOUNTED ESTATE PAYMENT – The assigned capital credits from _____ through _____ would be discounted to a total estate payment of \$ _____, and would be paid upon completion of the application form and when the Board of Directors determines that payment will not jeopardize the financial condition of the Cooperative. The discounted estate payment is based on the premise that money received today has more value than money to be received over a period of years.

_____ ACCOUNT TRANSFER – The assigned capital credits from _____ through _____, a total of \$ _____ could be transferred upon the death of a member of the Cooperative. The executor can transfer the full amount of unretired capital credits to the account of another member.

A copy of the death certificate must be attached hereto.

Check payable to: _____

Address _____

Amount of check: _____

Check # _____

T34 _____

Active _____

Remove name _____

Final bill paid _____

Death cert. _____

I/We agree that when payment of said Capital Credits are made to the persons or the estate herein designated, by the undersigned, and in accordance with the option checked above, that the Cooperative shall be released and discharged from any and all liability on account thereof, and the undersigned further agree(s) to jointly and severally indemnify and save the Cooperative harmless from any and all further claims on account thereof, including reasonable attorney fees, which the Cooperative may incur, whether or not a lawsuit is filed.

That said decedent:

_____ Died Testate (leaving a Will) and estate was probated in _____ county, Missouri/Iowa, and is/is not closed and _____ is the Personal Representative of that estate.

_____ Died Intestate (leaving no Will) and estate was probated in _____ county, Missouri/Iowa, and is/is not closed and _____ is the Personal Representative of that estate.

_____ Died Testate (leaving a Will), and the estate has not been administered because _____

_____ Died Intestate (leaving no Will), and the estate has not been administered because _____

In Witness whereof, we have hereunto set our hands this _____ day of _____, 20_____.

I have read the above and understand the selection chosen cannot be changed.

X _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____.

X _____

NOTARY PUBLIC

NOTARY SEAL

I/We, as such legal representative(s) have authority to request payment of capital credits from United Electric Cooperative, Inc., to which decedent's estate is entitled, and further state(s) that the persons who are entitled to payment of said capital credits are:

Name Address

