

**PROPOSAL FOR PAYMENT OF
WHITEWATER VALLEY RURAL ELECTRIC MEMBERSHIP CORPORATION
CAPITAL CREDIT ACCOUNT OF
DECEASED PERSON**

WHEREAS, Whitewater Valley Rural Electric Membership Corporation has a capital credit account credited to _____,
whose death occurred on the _____ day of _____, _____;
a resident of _____ County, _____ (state); and

WHEREAS, under current bylaws and policies as determined by the Board of Directors of Whitewater Valley Rural Electric Membership Corporation, Whitewater Valley Rural Electric Membership Corporation may pay capital credit accounts of persons, who are deceased:

NOW THEREFORE, the undersigned person represents that he/she is the person legally entitled thereto by reason of the following: (check one)

- 1. Personal Representative of the Estate of the Decedent, which is currently open.
(A copy of current letters of administration or letters testamentary is attached.)
- 2. Where the decedent's solvent estate has been administered upon and closed, but this asset was not collected.
(A copy of decedent's Will and/or Court Order Approving Distribution is attached.)
- 3. No administration of the estate has been held or contemplated.
I am entitled to the payment of said asset all as provided under IC29-1-8-1 and 2.
(An Affidavit for Transfer of Assets without Administration is attached).

The undersigned person does hereby request Whitewater Valley Rural Electric Membership Corporation to pay to him/her the said asset in the amount of \$_____, and I agree to accept said amount as payment in full of the capital credit account due the decedent. By completing and signing this form, I am stating that I am legally entitled to receive these assets. As the Whitewater Valley Rural Electric Membership Corporation will only issue one check per estate, I will be responsible for distributing any other heirs' portions, and I will secure and save harmless and wholly indemnify Whitewater Valley Rural Electric Membership Corporation for all funds paid out under this request. The undersigned understands that if the Board of Directors of Whitewater Valley Rural Electric Membership Corporation determine that the payment of the capital credit account cannot now be made without impairing the financial condition of Whitewater valley Rural Electric Membership Corporation, that such payment will be made as soon as it can be paid without such impairment, and retirements are made. Please sign in the presence of a Notary Public.

X _____
(Signature) (Address)

(Phone)

(Notary Public use only)

STATE OF INDIANA, _____ COUNTY, SS:

Subscribed and sworn to before me a Notary Public in and for said county and state, this _____ day of _____.

Resident of _____ County
My Commission Expires: _____