

Incomplete forms cannot be processed.



Southeastern Electric Cooperative, Inc.

A Touchstone Energy® Cooperative



1514 E. Hwy 70/P.O. Box 1370 Durant, OK 74702 (580) 924-2170

CERTIFICATION OF ENTITLEMENT TO SOUTHEASTERN ELECTRIC COOPERATIVE CAPITAL CREDITS

I, _____, hereby make claim to the capital credits assigned by Southeastern
(PLEASE PRINT FULL NAME)

Electric Cooperative to the account of _____
(NAME OF DECEASED AND/OR NAME OF BUSINESS OF DECEASED)

DECEASED SSN

DOB

DOD

I certify that:

- 1) I am the party legally entitled to claim ownership of these capital credits payment because _____
_____;
- 2) I will be responsible for distributing the capital credits claimed in accordance with any predetermined agreements of the business to which they were assigned, or the will of the deceased member;
- 3) I will indemnify, defend and hold Southeastern Electric Cooperative harmless against any subsequent claims to or for these capital credit payments.
- 4) I understand that a copy of this certification statement will be released to any party making subsequent claims to these capital credits;
- 5) I will be required to provide a certified copy of the death certificate to Southeastern Electric Cooperative, if the member eligible for capital credits is now deceased.

SIGNATURE OF CLAIMANT	DATE	SSN OR FEDERAL ID
-----------------------	------	-------------------

ADDRESS	CITY	STATE	ZIP CODE
---------	------	-------	----------

PHONE NUMBER(S)	E-MAIL ADDRESS
-----------------	----------------

ACKNOWLEDGEMENT

STATE OF OKLAHOMA)
) ss.
COUNTY OF _____)

Before me _____, in and for this state, on this ____ day of _____, 20 ____, personally appeared _____ to me known to be the identical person(s) who executed the within and foregoing instrument, and acknowledged to me _____ executed the same as _____ free and voluntary act and deed for the uses and purposes therein set forth.

Notary Public
My Commission Expires: _____