

Bedford Rural Electric Cooperative, Inc.
Request for Unclaimed Capital Credits

Section 1 – To Be Filled Out By the Person Claiming Capital Credits

Name _____ Social Security Number _____
First Middle Last

Street Address _____

City _____ State _____ Zip _____

Relationship to Decedent _____ Phone () _____

Section 2 – Claiming Assets From (Information about the Deceased):

Name _____ Social Security Number _____
First Middle Last

Street Address (At Time of Service) _____

City _____ State _____ Zip _____

Date of Death _____ Phone () _____ Death/Short Certificate Attached _____

I hereby attest and certify that I am legally authorized agent of the above named former Bedford Rural Electric Cooperative member, and am empowered to act on behalf of the decedent's heirs to perfect this claim. I do further attest that any assets secured by me as a result of this claim will be distributed to the lawful owners in a timely manner. By signing this application, I represent that, under the penalties of perjury as defined by the Commonwealth of Pennsylvania, the foregoing information is true and correct to the best of my knowledge and belief. I understand that the cooperative will rely on the information that I have furnished. I specifically agree to indemnify and hold Bedford Rural Electric Cooperative, Inc. harmless in the event the cooperative incurs any costs (including attorney fees), damages, or liability for acting on or relying on the information that I have supplied in this document and with the payment of these capital credits to me.

Signature _____ Date _____

Section 4. - Notary Seal

State of: _____ County of: _____

Before me, the undersigned notary public, personally appeared _____ who having been first duly sworn, deposes that he/she has read the above document and that the statements and information contained within, together with the documents attached, are true and correct to the best of his/her knowledge.

Sworn to and Subscribed before me this _____ day of _____, 20____.

My Commission Expires: _____

My Commission Number: _____

Seal

(Notary Public)