

Date: _____

STATE OF: _____)

COUNTY OF: _____)

AFFIDAVIT OF HEIRSHIP

RE: Patronage Capital

_____ (Deceased) _____ (Consumer #)

_____ (heir), first being duly sworn on oath states: That affiant(s) is/are the sole and only heir(s) at the law of _____ (deceased), who died on the _____ day of _____ (month), of _____ (year).

That this affidavit is made for the purpose of establishing the right of the affiant(s) to the aforesaid Patronage Capital refund check issued by Barton County Electric Cooperative, Inc.;

That as a part of the consideration for the delivery of the aforesaid check to your affiant(s), affiant(s) individually and jointly agree to indemnify and hold the Cooperative harmless from any claims by others that the aforesaid Patronage Capital refund check or any part thereof was due to those others; and that your affiant(s) will defend any action brought against the Cooperative as a result of such claims and pay any judgments which might be obtained against the Cooperative with regard to such claims.

Signature of Affiant

Signature of Affiant

Typed or printed name of Affiant

Typed or printed name of Affiant

Heir Social Security #

Heir Social Security #

Heir street address

Heir State

Heir ZIP code

Heir telephone # (include area code)

Subscribed and sworn to before me this _____ day of _____, _____.
Month Year

Notary Public

My Commission Expires