



LAMB COUNTY ELECTRIC COOPERATIVE

2415 S. Phelps Ave., Littlefield, TX 79339 | 806-385-5191 | FAX: 806-385-5197 | www.lcec.coop

Incomplete forms cannot be processed.

CERTIFICATION OF ENTITLEMENT TO LAMB COUNTY ELECTRIC COOPERATIVE CAPITAL CREDITS

I, _____, hereby make claim to the capital credits assigned by Lamb County
(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 Lamb County 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 provide a certified copy of the death certificate and/or other documents requested according to cooperative policy.

SIGNATURE OF CLAIMANT

DATE

SSN OR FEDERAL ID

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER(S)

ACKNOWLEDGEMENT

E-MAIL ADDRESS

STATE OF TEXAS

COUNTY OF _____

Before me, the undersigned, a Notary Public in and for said County and State,
on this ____ day of _____, 20____, personally
appeared _____ known to me to be the
person(s) whose name is subscribed to the foregoing instrument,
and acknowledged to me that they executed the same for the purposes
and consideration therein expressed.

Notary Public

My Commission Expires: _____