LAMB COUNTY ELECTRIC COOPERATIVE, INC. MEMBERSHIP AGREEMENT - PARTNERSHIP

This agreement made between Lamb County Electric Cooperative, Inc. (hereinafter called the "Cooperative") and "Partners".

Partners agree that the <u>proper execution of this agreement</u> and payment of a \$5.00 membership fee constitutes application for membership in the Cooperative.

Partners agree to purchase electric energy from the Cooperative whose principal offices are located at 2415 South Phelps Avenue, Littlefield, Texas. Partners agree that, when accepted by the Cooperative, this agreement shall constitute acceptance of the Partners by the Cooperative into the membership of the Cooperative. Partners agree to comply and be bound by the provisions of the Articles of Incorporation and Bylaws of the Cooperative, and such rules, regulations, and rates as may hereafter be adopted by the Cooperative as well as all rules and regulations prescribed by jurisdictional regulatory agencies.

Partners agree that all lines supplying them with energy, together will all switches, transformers, meters, appliances and equipment constructed or installed by the Cooperative shall at all times be and remain the sole property of the Cooperative, and the Cooperative shall have the right of access to said property to read meters, repair and service, and upon discontinuance of service for any reason, to remove same.

Partners agree that all amounts due under this agreement shall be payable at the Cooperative's offices located at 2415 South Phelps Avenue, Littlefield, Texas, or at such other locations as may be designated by the Cooperative. Partners agree to be responsible for paying any and all sums due the Cooperative for which they may hereafter be liable for, charged with, or obligated to pay

PARTNERS AGREE TO ESTABLISH AND MAINTAIN SATISFACTORY CREDIT WITH THE COOPERATIVE. FAILURE TO ESTABLISH A SATISFACTORY CREDIT RATING COULD RESULT IN THE COOPERATIVE REQUIRING A DEPOSIT.

Name	Phone
Mailing	
Address:	City/ST/Zip
Tax ID #	State Charter#
PARTNER'S INFORMATION	
Name	Phone #
Address	
Social Security #	Driver's License #
	Phone #
Address	
Social Security #	Driver's License #
	ORIZED REPRESENTATIVE'S INFORMATION
	ree to be personally responsible for any and all obligations made to Seller. I further agree that if payment of monies owed to Seller, seller may also disconnect service, which I am receiving under
Partner Signature	
Partner Signature	
VOTING DELEGATES: Any person herein duly authorized as an authorized representative may represent the organization as a voting delegate provided that person is not the voting delegate for any other membership.	
representative and am authorized to comade between applicant and the Coopunder any other membership name. If read this agreement and agree to the	Ing this membership agreement, I hereby affirm that I am listed above herein as an authorized deminit applicant to the conditions stated herein and the conditions stated in any other agreements herative. I also hereby affirm that applicant does not owe the Cooperative any delinquent monies further state that all above information is true and correct to the best of my knowledge, that I have conditions stated above. IT IS ALSO AGREED THAT THE COOPERATIVE WILL BE INFORMED TATIVE LISTED HEREIN IS NO LONGER AUTHORIZED TO REPRESENT APPLICANT.
Signed:	Date
Authorized Repre	sentative
Coop Representative:	Date: