



Affidavit for Deceased Member

I, the Affiant, _____, of lawful age, having first been duly sworn on oath,
YOUR NAME
states and alleges:

That Affiant resides at _____, _____, _____, _____
STREET CITY STATE ZIP CODE

Telephone (____) _____, and is the legal representative of the Estate/Trust of
_____, deceased.
NAME OF DECEASED

2. That Decedent died on _____, and at the time of his/her death, the Decedent resided
in _____ County, State of _____.

3. **Please check the correct following provision (choose only one).**

- a. The Estate/Trust of said Decedent is currently or has been probated in the Probate Court of _____, State of _____. Affiant has been duly empowered, authorized, and directed by all of the heirs and legatees who, by virtues of will or the law of intestacy, were entitled to inherit from said estate insofar as capital credits are concerned, to collect and receive said capital credits for and on behalf of said legatees and heirs. **Letters of Administration or Testamentary are attached.**
- b. The Decedent died intestate and his/her Estate/Trust has never been nor will be probated, or the said Decedent died testate and left a will or trust and said will has not nor will be offered for probate; all lawful debts of the Decedent have been paid; the time period for filing a will has passed; and all of the surviving heirs and beneficiaries have authorized, directed, and empowered this Affiant to collect capital credits due said estate on behalf of and for the benefit of said heirs or legatees. **If there are multiple heirs, list the information below.**

Name, Age, Relationship, Residential Address

4. Affiant further states that the above-named Decedent was a member of Rural Telephone Service Co., Inc. dba Nex-Tech "Cooperative" of Lenora, Kansas, during his or her lifetime, and that this Affidavit is made for the sole purpose of receiving from said Cooperative any capital credits credited to the account of said Decedent.

5. Affiant has been authorized by all necessary parties to receive payment of capital credits, and Affiant will hold cooperative harmless from any and all liability of any kind, type or nature, whatsoever, associated with said payment by Cooperative. If claims are made against Cooperative by Affiant or other by, through, or on behalf of Decedent for making said payment, Affiant agrees to indemnify Cooperative for all payments, expenses, and costs, including but not limited to, attorney's fees, related to said claims.

6. Affiant hereby waives any claim to capital credits that might have occurred during the portion of the year in which the Decedent died.

7. Affiant further states that if any unpaid bill still exists on the books of the Cooperative in the name of the Decedent that said amounts shall be deducted from credits due said Decedent.

8. I understand I have the option to leave the capital credits unretired and be eligible for any general retirements or I may retire the capital credits taking present day value of the account. **Please check one of the boxes below:**

a. **Present Day Value**

b. **Leave unretired and change the capital credit account name to:** _____

Affiant Signature: _____

Affiant Printed Name: _____

Date: _____

ACKNOWLEDGEMENT

STATE OF _____)
) **ss.**
COUNTY OF _____)

Before me, the undersigned, a Notary Public within and for said county and state, on this _____ day of _____, _____, appeared _____, known to me to be the identical person who executed the within and foregoing instrument and acknowledged to me that he/she executed the same as his/her free and voluntary act and deed for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the date and year last about written.

SEAL:

Printed Name: _____

Signed Name: _____

My Commission Expires: _____