

Alger Delta Cooperative Electric Association

Owned By Those We Serve



=====
426 North 9th Street - Gladstone, MI 49837 - Ph: 906-428-4141/800-562-0950 Fax: 906-428-3840
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ACCOUNT RE-ASSIGNMENT AND HOLD HARMLESS

This agreement concerns the Capital Credit Account of:

Deceased Member's Name

Capital Credit Number

Service Address

City

ST

Zip

Since the member is deceased and I am his or her lawful heir, I hereby request that the member's Capital Credit account be re-assigned to:

Heir's Name

To the extent any part of this account and any payments made on it are due to additional heirs, it is accepted by me on their behalf and I will take full responsibility for delivering their share to them. I will hold Alger Delta Cooperative Electric Association harmless by repayment of the account if I fail to do so.

_____ (A copy of the death certificate MUST be returned with this agreement)
Member Date of Death

Dated: _____

Signature of Heir

Heir's Name: _____

Heir's Address: _____

Heir's City ST ZIP: _____

Phone: _____

Relationship of Heir to Member

NOTE: Witness must not be a relative of the Heir

Dated: _____

Please PRINT name of witness

SIGNATURE of witness