

APPLICATION FOR DISTRIBUTION OF GENERAL CAPITAL CREDITS RETIREMENT OF DECEASED MEMBER

(Please refer to	instructions.)							
Decedent	REMC Customer Number							
	Member Name:	Date of Death: / /						
[Please attach	Joint Member ¹ :	Date of Death: / /						
copy of Death Certificate(s)]	Address of Decedent's ² legal residence at time of death:							
	¹ Include spouse here only if REMC records ² When REMC records show both names, th	show both names. e "Decedent" for this Application is the last surviving spou	use.					
	Name:							
	Relationship to Decedent:							
Anneliaant	Legal Capacity to Estate: 🗅 Executor 🗅 Administrator 🗅 Heir 🗅 Other							
Applicant	Address:							
	Phone Number:	Social Security Number:						

Proof of	If an estate was opened, a copy of either the final distribution order entered by the court in the
Right to	estate or a copy of the will probated must be attached. If no decedent's estate was ever opened,
Distribution	an Affidavit for Transfer of Personal Property (45-Day Affidavit/Intestate) must be attached.

CurrentList all beneficiaries of the administered estate at the time final distribution was made in
Exhibit "A". List all living beneficiaries and/or living descendants of deceased beneficiaries in
Exhibit "B". If no estate administration occurred, distributees are listed in an Affidavit for
Transfer of Personal Property (45-Day Affidavit/Intestate) referred to above.

From time to time, the Jackson County Rural Electric Membership Corporation may make a general capital credits distribution pursuant to Article XI, Section 2, of its Bylaws and pursuant to its current Capital Credits Policy. After the filing of this "Application for Distribution of General Capital Credits Retirement of Deceased Member", Applicant will be required to provide an update of Exhibit "B" if any of the current living beneficiaries or descendants subsequently are deceased.

Applicant requests distribution of retired capital credits held by Jackson County Rural Electric Membership Corporation in the name of the above-named decedent and hereby promises that the amount received shall be distributed by Applicant to decedent's heirs/legatees entitled to the same according to the law as set out in Exhibit "B" attached hereto. Applicant warrants that all of the information set out in this Application is based upon his/her personal knowledge and warrants that all documents and exhibits attached hereto are true and correct to the best of his/her knowledge. Applicant agrees to indemnify, defend, and hold the Jackson County Rural Electric Membership Corporation harmless from and against any subsequent claims or demands of any person or persons whomsoever arising from the payment of the capital credits of the above-named decedent to Applicant. This Application will be disclosed to any individual who makes any subsequent claim or demand to any general capital credits retirement regarding the named decedent herein which is distributed hereunder.

Date: _____

Applicant Signature (*in the presence of a notary*)

Application Page 2:

[If there is an attached "Affidavit for Transfer of Personal Property," this notary acknowledgement is not required. The Application signature above may be acknowledged with the Affidavit signature on Affidavit Page 2.]

STATE O	F			_)								
COUNTY	OF) SS:								
	0			_/								
Before	me,	а	Notary					•				appeared plication for
Distribut	tion of C	Gene	ral Capital	Credits Re					Accuro		itueneu np	
WITNESS	S my ha	nd ar	nd Notaria	l Seal this _.	d	ay of _		 , 20	•			
						Signa	ture	Nc	tary Pul	olic		
						Printe	ed					
My Com	mission	Expi	res:									
My Cour	nty of R	eside	nce is:									

Disclaimer: The Jackson County Rural Electric Membership Corporation, in accepting and processing this Application for the making of a general distribution of capital credits to Applicant for distribution to heirs, legatees, or descendants of heirs or legatees of the deceased member, is making no independent determination as to the factual representations made in the Application and is making no independent determination of the legal effect of the documents attached thereto. In the processing of this Application, the Jackson County Rural Electric Membership Corporation may provide general information about the laws of descent and distribution in the State of Indiana at times material to the Application but is not offering any legal advice or opinion in regard to who is entitled to receive the deceased member's accrued capital credits. If there is any question about who is entitled to receive the accrued capital credits of the deceased member, Applicant should, and is encouraged, to seek advice from his/her own legal counsel.

Application Page 3:

[If the "Affidavit for Transfer of Personal Property" form is attached, this exhibit is not required.]

Application Exhibit "A"

Estate Distributees

List all beneficiaries of the administered estate at the time the final distribution was made.

Name	Address	Phone No.
[Attach additional pages as needed.]		

[Attach additional pages as needed.]

[If there is an attached ""Affidavit for Transfer of Personal Property," this exhibit is not required.]

Application Exhibit "B"

Current Distributees

List all currently living beneficiaries and/or living descendants of deceased beneficiaries.

Name	Address	Phone No.
[Attach additional pages as peeded]		

[Attach additional pages as needed.]

[If no estate for the decedent was ever opened, this Affidavit for Transfer of Personal Property must be completed in lieu of Application Exhibits "A" and "B". Please refer to instructions.]

STATE OF _____)
() SS:

COUNTY OF _____

IN RE:

(NAME OF DECEDENT)

(DATE OF DEATH)

AFFIDAVIT FOR TRANSFER OF PERSONAL PROPERTY (45-Day Affidavit/Intestate)

1. The above-named decedent died intestate on ______, ____ while domiciled in ______ County, State of ______, and as the probate estate was of minimal value, the opening of an estate was not required.

2. More than forty-five (45) days have elapsed since the death of the decedent.

3. No application or petition for the appointment of a personal representative is pending or has been granted in any jurisdiction.

4. The following persons are the only heirs, or living descendants of the heirs, of the decedent: See attached Affidavit Exhibit "A".

5. The value of the decedent's gross probate estate, less liens and encumbrances, does not exceed the sum of Fifty Thousand Dollars (\$50,000.00) as provided by I.C. 29-1-8-1, including the costs and expenses of administration and reasonable funeral expenses.

6. The following is a full description of all the personal property belonging to the decedent, together with the estimated value thereof according to the best knowledge and information of the Affiant herein:

Description of Personal Property	Estimated Value
Accrued capital credits with Jackson County Rural Electric	
Membership Corporation	\$

7. As the decedent died more than nine (9) months prior to the making of this Affidavit and as the decedent presently has no undischarged secured debt, there are no known creditors who would have a claim against the capital credits to be distributed hereunder.

8. By reason of the above-stated matters, the Affiant requests that the above-enumerated personal property of the decedent, to-wit: Accrued capital credits with Jackson County Rural Electric Membership Corporation, be transferred to the Affiant for distribution pursuant to the provisions of the Indiana laws of descent and distribution. The Affiant understands that these accrued capital credits will be distributed from time to time, according to the business judgment of the Jackson County Rural Electric Membership Corporation, pursuant to the provisions of Article XI, Section 2, of its Bylaws and pursuant to its currently in force Capital Credits Policy.

P.O. Box K • Brownstown, IN 47220-0311 • (812) 358-4458 Telephone • (800) 288-4458 Toll Free • (812) 358-5719 Fax

Affidavit Page 2

WHEREFORE, the Affiant herein hereby requests that the Jackson County Rural Electric Membership Corporation presently in possession of the above-enumerated personal property, namely, accrued capital credits, transfer the same to said Affiant from time to time as determined by the Jackson County Rural Electric Membership Corporation pursuant to the provisions of Article XI, Section 2, of its Bylaws and pursuant to its currently in force Capital Credits Policy, all pursuant to the Indiana Code for the distribution of said property to the individual(s) set out in Affidavit Exhibit "A" by the Affiant, and that distribution of said property to the Affiant herein shall release said Jackson County Rural Electric Membership Corporation from any liability with regard to the proper application and disbursement of said personal property.

The Affiant herein hereby charges himself/herself with the responsibility of proper distribution of the funds to the individual(s) set out in Affidavit Exhibit "A" according to the provisions of the Indiana Code, and hereby agrees to hold harmless said Jackson County Rural Electric Membership Corporation from any liability with regard to the transfer of said personal property.

The Affiant hereby further agrees that this Affidavit may be disclosed to any individual who makes any subsequent claim or demand as to any general capital credits retirement to be distributed on account of the decedent herein by the Jackson County Rural Electric Membership Corporation.

"AFFIANT"

Signature (*in the presence of a notary*)

Printed

Address

STATE OF _____)
() SS:
(COUNTY OF _____)

Before me, a Notary Public, in and for said County and State personally appeared ______, the Affiant herein, who acknowledged the execution of the foregoing "Affidavit for Transfer of Personal Property" **AND** the attached "Application for Distribution of General Capital Credits Retirement of Deceased Member".

WITNESS my hand and Notarial Seal, this ____ day of _____, 20____.

Signature Nota

Notary Public

My Commission Expires: _____

Printed

My County of Residence: _____

Affidavit Exhibit "A"

(Heirs or Living Descendants of Heirs of Decedent)

Name	Relationship to Decedent	Address

[Attach additional pages as needed.]

INSTRUCTIONS FOR: APPLICATION FOR DISTRIBUTION OF GENERAL CAPITAL CREDITS RETIREMENT OF DECEASED MEMBER

Decedent information section: If REMC records show a single member, provide name, date of death, a copy of the death certificate or other evidence, and the address of his/her legal residence at time of death. (A death certificate may be obtained from the health department in the county where the decedent died.) If REMC records show a joint membership, i.e. both husband and wife, provide names, dates of death, and death certificate copies for both. Provide the address of the legal residence at time of death for the last surviving spouse. For the rest of the form, the term "decedent" will refer to the last surviving spouse since he/she became the sole owner of the capital credits.

Applicant information section: Provide your full name and contact information; your social security number; your relationship to the decedent; your legal standing with respect to the estate.

<u>Proof of Right to Distribution:</u> The county clerk could help determine if an estate was processed through a court.

If an estate was opened and processed through a court for an individual member or the last surviving spouse of a joint membership, attach a copy of the court's final distribution order or a copy of the will as stamped by the court. These documents are available from the county clerks' offices. Complete <u>Application Exhibit "A"</u> showing the original beneficiaries at the time the estate was settled. Also, complete <u>Application Exhibit "B"</u> showing the beneficiaries who are still living and the living descendants of the original beneficiaries who are now deceased. You will sign the Application Page 1 in the presence of a notary (typically available at banks and other business offices), who will verify your identity and acknowledge your signature. You will **not** need to complete the Affidavit for Transfer of Personal Property. Make copies for your records, and return the completed forms to Jackson County REMC.

If an estate was never processed through a court, you will need to complete the Affidavit for Transfer of Personal Property (45-Day Affidavit/Intestate) in addition to the Application.

INSTRUCTIONS FOR: AFFIDAVIT FOR TRANSFER OF PERSONAL PROPERTY (45-DAY AFFIDAVIT/INTESTATE)

Heading information section: Provide state and county where affidavit is being signed; also, name of decedent and date of death. "Decedent" will be either the single member of record if REMC records show only one name, or the last surviving spouse if REMC records show a husband and wife.

Item 1: Provide date of death and the county and state of decedent's last legal residence.

Item 6: Provide value of decedent's capital credits, available from Jackson County REMC.

<u>Affidavit Exhibit "A":</u> Provide names, addresses, and relationships of all heirs and living descendants of the heirs.

You will sign the Application Page 1 and the Affidavit Page 2 in the presence of a notary (typically available at banks and other business offices), who will verify your identity and acknowledge your signatures. Make copies for your files, and return completed forms to Jackson County REMC.

DOCUMENT TERMS:

Affiant: A person who signs and swears to a statement's truth before a Notary Public

Decedent: A deceased person

Intestate: Without leaving a valid will

Legatee: A beneficiary who received a gift under the terms of a will

Indiana Intestacy Law^a After September 1, 1987

Survivors	Who Receives What
Spouse, one or more children	¹ / ₂ estate to spouse ^b
	¹ / ₂ estate to child or children
Spouse, no children	³ / ₄ estate to spouse
Parents of the deceased person	$\frac{1}{4}$ estate to parent(s)
Spouse, no children or parents	All to spouse
Second or subsequent childless spouse	Spouse: ¹ / ₂ of personal property, 25% of the
	fair market value of real estate,
	and
Children of first marriage	¹ / ₂ personal property and title to real estate to
	child, children, or issue of deceased children
Children, no spouse or parents	All to children
No spouse or children	Equal sharing by parents and siblings, with
	parents getting at least 1/4 each
No issue of deceased brothers and sisters,	Equal sharing by surviving grandparents
no parent	
No grandparents	Equal sharing by brothers and sisters
	(uncles and aunts) of decedent's parents
	or by issue of uncles and aunts by
	representation
None of the above	State of Indiana

^a These rules are found in the Indiana Code at 29-1-2. Indiana Code is online at <<u>http://www.in.gov/legislative/ic/code//></u>. Consult a lawyer for assistance.

- ^b A surviving spouse is entitled to this amount as a minimum even if the deceased spouse had a will that left the surviving spouse a lesser share. IC 29-1-3-1 sets the surviving spouse's elective share at one-half (½) if a first spouse or a spouse with children by the deceased spouse. The second or subsequent childless spouse's elective share remains at one-third (1/3) of the testator's personal property and 25% of the value of real estate. However, children and other lineal descendants and ancestors have no such statutory right. That is, a decedent may avoid all family in a will with or without mentioning heirs and ancestors, except a surviving spouse, unless the spouse does not object or is bound by a contractual agreement. See IC 29-1-3-8 for an exception.
- ^c If a child has predeceased a parent, then the issue of that child takes by representation (i.e., the children of a child divide their parent's share equally).