



File to Acct # \_\_\_\_\_

# CAPITAL CREDIT FORM

(Notary Required)

Date: \_\_\_\_\_

Date of Death: \_\_\_\_\_

Death Cert. # \_\_\_\_\_

Member Name: \_\_\_\_\_

Patronage #: \_\_\_\_\_

I, \_\_\_\_\_ state that I am the:

- Executor of the Estate
- Administrator of the Estate
- Curator of the Estate
- Guardian
- Other (please explain) \_\_\_\_\_

of the above member (previous member) of Citizens Telephone Cooperative.

This document is to instruct you in the handling of the above referenced account. Please assign or change this account as indicated below:

- Transfer this account in entirety, with all outstanding past, current and future credits, adjustment and distribution to:

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

- Conduct all future transactions in care of the following individual, including issuance of distributions in their name. Settlement among the claimants hereof will be handled by the below named party:

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City/County of: \_\_\_\_\_ State of: \_\_\_\_\_

Acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Public \_\_\_\_\_

My Commission expires: \_\_\_\_\_ Notary Registration # \_\_\_\_\_

Note: If this account is being donated to a charity, church or civic organization the exact legal name must be given or attach a description broad enough to determine the receiving party. Example: The Hill Top Church on Rt. 999 in Floyd County, VA through its trustees, elders, or other representative of the congregation to the benefit of the congregation of the church.) Please include a contact name and address.