



Your Touchstone Energy® Cooperative 

## Oregon Trail Electric Cooperative Capital Credit Packet Checklist

- All accounts must be closed and out of the decedents name prior to special retirement of capital credits
  - Death Certificate(s) of all members on the account
  - Completed Application
  - Notarized Affidavit of Heirship
  - Copy of Will (if decedent died with will)
  - Personal Representative paperwork (if personal representative is named)
  - Trust paperwork (if decedent left assets to trust)
  - Legal documentation proving legal claim if information is not indicated in the will/trust/personal representative documentation
  - Other:
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- Save packet prior to submitting
  - Options in lieu of discounted special early retirement, please see our website at [otec.coop/capital-credits](http://otec.coop/capital-credits)
  - If you need a notary each of our local offices has a notary available
  - If you have questions, please call 541-523-3616

### How to return packet:

Email to: [capitalcredits@otec.coop](mailto:capitalcredits@otec.coop)

Mail to: Oregon Trail Electric Cooperative  
PO Box 226, 4005 23<sup>rd</sup> Street  
Baker City, OR 97814

### Drop off at any one of our OTEC offices:

La Grande: 2408 Cove Ave, La Grande, OR 97850

John Day: 400 Patterson Bridge Rd, John Day, OR 97845


Burns: 567 W Pierce St, Burns, OR 97720

Baker City: 4005 23<sup>rd</sup> St, Baker City, OR 97814



# OREGON TRAIL ELECTRIC COOPERATIVE

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Your Touchstone Energy® Cooperative 

Corporate Headquarters: 4005 23<sup>rd</sup> Street · PO Box 226 · Baker City, Oregon 97814

Phone (541) 523-3616 · Fax (541) 524-2865 · [www.otec.coop](http://www.otec.coop)

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Dear Applicant:

Re: Deceased Members Early Retirement of Capital Credits

Upon receiving a completed application from a qualified party, Oregon Trail Electric Cooperative (OTEC) may retire capital credits before the regularly scheduled rotation. Capital credits earned by a business may not be entitled to this early retirement option. If the application is approved by the Board of Directors, all capital credits are subject to be discounted to the net present value before pay-out. The current discount rate is 6.24 percent, however, all capital credits earned beyond maturity (more than 20 years) are paid at 100 percent.

Enclosed, please find the application for retirement of decedent's capital credits and an affidavit of heirship. Should you decide to proceed, complete and sign all documents enclosed, and return the packet to our office as indicated on the instructions. **Be sure to include: 1) a copy of the death certificate, 2) a notarized affidavit, 3) a copy of the will (if applicable), 4) any other pertinent information required according to the checklist enclosed. Include any court or legal documents that substantiate your right to the funds.** You may want to check with your estate attorney before returning the documents to OTEC.

OTEC will attempt to contact the applicant if any additional information is required to process the application. If the applicant does not provide OTEC with the necessary paperwork within 90 days, the application will be declined and returned to the applicant.

Please be aware that early pay-out of capital credits is final and closes the deceased patron's OTEC account permanently. If you choose not to retire the deceased member's account, capital credit distributions will continue to occur during the regularly scheduled rotation until the account balance reaches zero. It is incumbent upon you to keep OTEC updated of any address changes.

Please email or call if you have any questions. Note that the processing period for retirement of decedent's capital credits is 60 - 90 days.

Sincerely,

OTEC Member Services

enclosures

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*Proudly serving Baker, Grant, Harney and Union counties*

**Baker City**  
4005 23<sup>rd</sup> Street · PO Box 226  
Baker City, Oregon 97814  
**(541) 523-3616**  
Customer office fax (541) 524-2863

**Burns**  
567 W Pierce  
Burns, Oregon 97720  
**(541) 573-2666**  
Fax (541) 573-3401

**John Day**  
400 Patterson Bridge Road · PO Box 575  
John Day, Oregon 97845  
**(541) 575-0161**  
Fax (541) 575-0480

**La Grande**  
2408 Cove Avenue  
La Grande, Oregon 97850  
**(541) 963-3155**  
Fax (541) 963-8515



Your Touchstone Energy<sup>®</sup> Cooperative

# Oregon Trail Electric Cooperative

## Application for Retirement of Decedent's Capital Credits

Date \_\_\_\_\_ OTEC Account # \_\_\_\_\_

*Decedent information:*

Full name of deceased (please print clearly)

Physical and mailing address at time of death

Date of death \_\_\_\_\_ Is there a will? Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_

Does this contain unclaimed funds (uncashed checks)? Yes \_\_\_\_\_ No \_\_\_\_\_ Don't know \_\_\_\_\_

Name, address, birth dates and either their OTEC account number or the last 4 of their social security of heirs entitled to share in this capital credit refund (additional lines available on next page):

Name	Date of birth	Address	OTEC Account # or SS #
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**\*\*If more than 2 add on a separate document\*\***

*Applicant information:*

Name of applicant \_\_\_\_\_ Email \_\_\_\_\_

Spouse \_\_\_\_\_ Child \_\_\_\_\_ Parent \_\_\_\_\_ Sibling \_\_\_\_\_ \*\*Other \_\_\_\_\_

Applicants Social Security (Last 4 only) \_\_\_\_\_ Home phone \_\_\_\_\_

Address \_\_\_\_\_ Cell phone \_\_\_\_\_

**\*\*Name of executor, personal representative or trustee if not applicant**

Address of executor, personal representative, trustee or attorney

Phone number of executor, personal representative or trustee if not applicant

**\*\* Documentation proving legal claim to the estate is required if "other" is indicated**

**All completed documents should be returned OTEC. If any lines are left blank this form will be returned to you. If any do not apply simply mark "n/a."**

**I certify that all the information is completed, true, and correct.**

*Applicant signature* \_\_\_\_\_

Date \_\_\_\_\_



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## Oregon Trail Electric Cooperative

### Affidavit of Heirship (page 1)

Please do not leave any blanks:

State of \_\_\_\_\_ )

County of \_\_\_\_\_ )

I, \_\_\_\_\_, being duly sworn, state under oath and subject to penalties of perjury, as follows:

1. On (date of death) \_\_\_\_\_ (name of deceased) \_\_\_\_\_, a member of Oregon Trail Electric Cooperative (OTEC), died.
2. Decedent's place of death was \_\_\_\_\_. The last 4 digits of the Decedent's Social Security Number are: \_\_\_\_\_
3. A certified copy of Decedent's death certificate is attached.
4. My relationship to Decedent is: \_\_\_\_\_. (for example, Heir, Personal Representative, etc.).
5. The Decedent died:
  - Without a will (intestate), or
  - With a will (testate).
6. Attached to the Affidavit is a list of the heirs of the Decedent, their relationship to the decedent, and the last know addresses for each.
7. Pursuant to Oregon Revised Statutes (ORS) 114.515, I  **have**, or  **have not**, filed an affidavit with the clerk of the probate court in the County of \_\_\_\_\_, Oregon, claiming that the value of Decedent's estate is less than \$275,000. If an affidavit under ORS 114.515 has been filed, a copy thereof is attached to this affidavit.
8. I hereby request that OTEC distribute the capital credits owned by Decedent to me, for one of the following reasons:
  - I am the Personal Representative of Decedent's estate.
  - I am the sole surviving heir of the Decedent.
  - I am one of Decedent's surviving heirs and have notified Decedent's other surviving heirs of my intention to request distribution of OTEC capital Credits owned by Decedent to me, have provided a copy of this Affidavit to such other surviving heirs, and agree to comply with the distribution requirements to such other heirs as required by paragraph 9 below.
  - I am Trustee of Decedent's Trust and the Trust is entitled to OTEC capital credits to be distributed in accordance with terms of the Trust.



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## Oregon Trail Electric Cooperative

### Affidavit of Heirship (page 2)

9. I hereby affirm that if I am not the sole surviving heir of Decedent, or if I am the Personal Representative of Decedent's estate, that I will distribute Decedent's capital credits to the beneficiaries of Decedent's estate, or the heirs of Decedent, in accordance with law.
  
10. Should OTEC distribute Decedent's capital credits to me, I hereby agree to hold OTEC harmless and to indemnify OTEC against all claims, demands or causes of action brought by any person against OTEC for wrongful distribution of Decedent's capital credits.

Affiant Signature: \_\_\_\_\_

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

Affiant (print name): \_\_\_\_\_

\_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned, a notary public in and for said State, personally appeared \_\_\_\_\_, known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal the day and year first above written.

Notary Signature: \_\_\_\_\_

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

Notary (print name): \_\_\_\_\_

Notary Public for (State) \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

[Notary Seal]