



Your Touchstone Energy[®]
Cooperative

OREGON TRAIL ELECTRIC COOPERATIVE

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

Phone (541) 523-3616 · Fax (541) 524-2865 · www.otec.coop

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.

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 of heirship, 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 the discounted special early retirement 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: (1) Checklist (2) Application (3) Affidavit of Heirship

Proudly serving Baker, Grant, Harney and Union counties

Baker City

4005 23rd 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



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:
-
- ☐ Save packet prior to submitting
 - ☐ Options in lieu of discounted special early retirement, please see our website at 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

Mail to: Oregon Trail Electric Cooperative
PO Box 226, 4005 23rd 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 23rd St, Baker City, OR 97814



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 #

****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



Oregon Trail Electric Cooperative Affidavit of Heirship

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 _____ (the "Decedent"),
(date of death) (name of decedent)
a member of Oregon Trail Electric Cooperative ("OTEC"), died.

2. The Decedent's place of death was _____.

The last 4 digits of the Decedent's Social Security Number are _____.

3. The Decedent died (please check one):
without a will (intestate), or
with a will (testate).

4. Please check one of the following:

I HAVE filed a "simple estate affidavit" for the Decedent's estate pursuant to Oregon Revised Statutes (ORS) 114.510 and 114.515.

I HAVE NOT filed a "simple estate affidavit" for the Decedent's estate pursuant to Oregon Revised Statutes (ORS) 114.510 and 114.515.

5. I hereby request that OTEC distribute the capital credits owned by the Decedent to me, for one of the following reasons (please check all that apply):

I am the Personal Representative of the Decedent's estate.

I am the sole surviving heir of the Decedent.

I am one of the Decedent's surviving heirs and have notified the Decedent's other surviving heirs of my intention to request distribution of OTEC capital credits owed by the 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 6 below.

I am Trustee of the Decedent's Trust and the Trust is entitled to OTEC capital credits to be distributed in accordance with terms of the Trust.

6. I hereby affirm that if I am not the sole surviving heir of the Decedent, or if I am the Personal Representative of the Decedent's estate, that I will distribute the Decedent's capital credits to the beneficiaries of the Decedent's estate, or the heirs of the Decedent, in accordance with law.



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Oregon Trail Electric Cooperative Affidavit of Heirship

7. Should OTEC distribute the 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 the Decedent's capital credits.
8. Attached to this affidavit are the following documents:
 - a. A certified copy of the Decedent's death certificate;
 - b. A list of the heirs of the Decedent, their relationship to the Decedent, and the last known addresses for each heir.
 - c. If applicable, a copy of the simple estate affidavit for the Decedent's estate. (See paragraph 4, above.)

Affiant Signature:

Date:

Affiant (print name):

[Below is for Notary to Fill Out]

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]

(See following page for Attachments)



Oregon Trail Electric Cooperative Affidavit of Heirship

Attachments

Please attach the following documents to this Affidavit:

1. Certified copy of the Decedent's death certificate;
2. A list of heirs of the Decedent, the relationship of each heir to the Decedent, and the last known address for each heir, and
3. If applicable (see paragraph 4 above), a copy of the simple estate affidavit filed for the Decedent's estate.