

**PROPOSAL FOR PAYMENT OF
WHITEWATER VALLEY RURAL ELECTRIC MEMBERSHIP CORPORATION
CAPITAL CREDIT ACCOUNT OF
DISSOLVED CORPORATION OR LIMITED LIABILITY COMPANY**

WHEREAS, Whitewater Valley Rural Electric Membership Corporation has a capital credit account credited to _____, a Corporation/LLC legally formed in the State of _____, on the _____ day of _____, _____; and

WHEREAS, said Corporation/LLC was legally dissolved as an entity on the _____ day of _____, _____, as evidenced by the records in the Office of the Secretary of State of the State of _____;

WHEREAS, under current bylaws and policies as determined by the Board of Directors of Whitewater Valley Rural Electric Membership Corporation, Whitewater Valley Rural Electric Membership Corporation may pay capital credit accounts of Corporation or Limited Liability Companies that have been legally dissolved;

NOW THEREFORE, the undersigned person represents that he/she is the person legally entitled thereto by reason of the following: (check one)

- 1. The undersigned was the sole shareholder/member of the dissolved Corporation/LLC; all debts of the Corporation/LLC have been discharged; no creditors have any claims outstanding against the Corporation/LLC; and the undersigned is the only person having any interest in the dissolved Corporation/LLC.
- 2. The undersigned is the assignee designated by the Corporation/LLC at the time of the dissolution of said Corporation/LLC to receive any and all assets that may have belonged to the Corporation/LLC.

The undersigned person does hereby request Whitewater Valley Rural Electric Membership Corporation to pay to him/her the said asset in the amount of \$_____, and hereby agrees to accept said amount as payment in full of the capital credit account due the dissolved Corporation/LLC. By completing and signing this form, the undersigned states that I am legally entitled to receive these assets. As the Whitewater Valley Rural Electric Membership Corporation will only issue one check per dissolved Corporation/LLC, I will secure and save harmless and wholly indemnify Whitewater Valley Rural Electric Membership Corporation for all funds paid out under this request.

The undersigned understands that if the Board of Directors of Whitewater Valley Rural Electric Membership Corporation determines that the payment of the capital credit account cannot now be made without impairing the financial condition of Whitewater Valley Rural Electric Membership Corporation, that such payment will be made as soon as it can be paid without such impairment. Please sign in the presence of a Notary.

X _____
(Signature) (Address & Phone)

STATE OF INDIANA, _____ COUNTY, SS:

Subscribed and sworn to before me a Notary Public in and for said county and state, this _____ day of _____, _____.

Resident of _____ County

My Commission Expires: _____