

AFFIDAVIT OF CLOSED ESTATE

Comes now the undersigned, who being first duly sworn says:

1. This affidavit is given concerning _____ (decedent), who died on _____.
2. That estate proceedings were filed in the _____ Court on _____, under Cause Number _____.
3. That the following persons were the sole residuary heirs of the decedent:

<u>NAME</u>	<u>ADDRESS</u>	<u>RELATIONSHIP</u>	<u>SHARE</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. That said Estate was closed by Order of the Court on _____.

Dated this _____ day of _____, 2019.

Address: _____

(print name of affiant)

State of Indiana
County of _____, SS:

Before me, the undersigned, a Notary Public, on this _____ day of _____, 2019, personally appeared _____ and swore that the foregoing representations were true.

My Commission Expires: _____

Notary Public

(print name of Notary)
Resident _____ County, IN

Jay County REMC
P.O. Box 904
Portland, IN 47371
260-726-7121

EXHIBIT A

Account # _____

WHEREAS, Jay County Rural Electric Membership Corporation, hereinafter called REMC has a Capital Credit account credited to _____, whose death occurred on _____, while a resident of _____ County, _____ State; and

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

- () 1. Personal Representative of the Estate, which is currently open, and a copy of certified letters of administration or letters testamentary are attached hereto.
- () 2. The decedent's solvent estate has been administered and closed, but this asset was not collected, and attached hereto is an Affidavit stating the heirs of decedent and closing of said estate.
- () 3. No administration of the estate has been held or contemplated, for the reason that under I.C. 29-1-8-1, the gross probate estate, wherever located, less liens and encumbrances, does not exceed \$50,000, and a copy of my Small Estate Affidavit is attached hereto.

The undersigned person does hereby request REMC to pay to him/her the present value of said asset. By completing and signing this form, I am stating that I am a legal heir and entitled to receive these assets. As the REMC will only issue one check per estate, I will be responsible for distributing any other heirs' portions, and to indemnify and hold harmless REMC of any liability incurred by reason of payment of said Capital Credits to the undersigned.

Signature

Address

Telephone Number

STATE OF INDIANA, _____ COUNTY,
Subscribed and sworn to before me a Notary Public in and for said county and state, this _____ day of _____, 20_____.

Notary,
Resident of _____ County
My Commission Expires _____