



**CHOOSE ONE OPTION**

(\_\_\_\_) Retire all allocated capital credits of decedent **now** for a discounted present value payment. The allocated amount is \$\_\_\_\_\_ and the **present value to be paid** is \$\_\_\_\_\_. No additional capital credits will be allocated or paid to the decedent.

Make the check payable to:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

SSN# or EIN# : \_\_\_\_\_

(Enter SSN# if check goes to individual, EIN# if check goes to estate/trust)

(\_\_\_\_) Assign the decedent’s allocated capital credits to the following successors(s) to be retired when authorized by the cooperative’s Board of Directors.

Please assign the decedent’s capital credits to his/her successor(s) as follows:

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

SSN# or EIN# : \_\_\_\_\_

(Enter SSN# if successor is an individual, EIN# if successor is an estate/trust)

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Successor of Decedent

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public  
For the State of North Dakota  
My Commission Expires: \_\_\_\_\_