CAPITAL ELECTRIC COOPERATIVE, INC.

Request for Removal of Name from an Active Joint Account

This side to be completed by the person that will NO LONGER be on the account:

I request removal of my name from account # _____, leaving the account in _____'s name effective _____ (date). I understand that by removing my name from the account, I am no longer responsible for any usage billed after the effective date and that I am no longer eligible for any future Capital Credit allocations to this account .

Please enter new contact information:

Member Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

_____

Member's signature Date

Subscribed and sworn to before me this

_____ day of_____, 20_____

Notary Public: _____

_____County, State of _____

Commission expires:_____

This side to be completed by the person that will continue to be on the account:

I agree to _____ removing his/her name from our account and from the effective date stated at left, I am solely responsible for the bills and I will receive all future Capital Credits allocated to this account.

Joint Member Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

SSN#: _____

_____

Joint Member's signature Date

Subscribed and sworn to before me this

_____ day of_____ _____, 20_____

Notary Public: _____

_____County, State of _____

Commission expires:_____

***Upon completion of this form, Capital Electric will split previously allocated capital credits equally between both members unless otherwise specified in a divorce decree (documentation required) or by the completion of an accompanying "Capital Credit Designation" form.**