

## **Unclaimed Capital Credits Inquiry**

As a current or former member of Continental Divide Electric Cooperative, you may be owed retired capital credits. To determine if **you** are eligible for an unclaimed capital credit check, please provide information for **Numbers 1-5**. If you are submitting information on behalf of someone else, provide information for **Numbers 6-11**. Submitting this form does not guarantee a disbursement will be made.

1.	Please provide the name you used to establish your CDEC electric account and the last 4 digits of your Social Security Number. If you are inquiring about capital credits for a commercial entity (business), please provide the federal tax ID number (EIN):  Please provide your current contact information below:				
2.					
	Mailing address	City	State	Zip Code	Phone Number
3.	Please provide the physical address(s) that received CDEC electric service. For each address, please list the year(s) service was received at the location.				
4.	If you are requesting a <b>n</b> provide appropriate lega	•		e capital credit check	s, state why. You will be required to
	If you want to donate your capital credits to CDEC's Education Foundation, select an option below.  (You will also need to complete an Assignment of Capital Credits Agreement.)				
	Apply all future years of retirement			Apply only the current year of retirement	
6.	If you are making an unc name and the last 4 digit				e, please provide that person's
	What is your relationship to this individual or business?  If the individual is deceased please attach appropriate legal documentation as proof.  If the individual is not deceased, please provide their current contact information below:				
	Mailing address	City	State	Zip Code	Phone Number
9.	Please provide the physical address(s) where the individual or commercial entity received CDEC electric service. Please list the year(s) service was received at the location.				
10	If you are making an unclaimed capital credits inquiry on behalf of someone else and you would like to make a <b>name change</b> for past and/or future capital credit checks, state why. You will be required to provide appropriate legal documentation as proof.				
11.	If you want to donate the individual's capital credits to CDEC's Education Foundation, select an option below.				

**Headquarters:** 1821 Clif Lear Ave. / PO Box 1087 / Grants, New Mexico 87020 **District Office:** 2500 NM Highway 602 / PO Box 768 / Gallup, New Mexico 87305

Apply all future years of retirement

(You will also need to complete an **Assignment of Capital Credits Agreement**.)

Apply only the current year of retirement