

PARTNERSHIP AFFIDAVIT FOR MJM CAPITAL CREDITS

I, the undersigned, hereby state and affirm that I was a member of the _____ Partnership. That said Partnership has been dissolved and is no longer in existence. That at the time it was dissolved, the following persons or entities were partners of the Partnership and that their percentage of the ownership of the Partnership when it was dissolved are as follows:

Name:	% of Ownership
_____	_____
_____	_____
_____	_____
_____	_____

Further, I state that there are no outstanding bills, obligations or liabilities that the Partnership owed at the time it was dissolved. Therefore, the Capital Credits to be paid for said dissolved Partnership should be paid to the above listed individuals in the percentages of ownership as listed above.

I, the undersigned, hereby state and affirm that the information contained in this Estate Affidavit is true and correct including that the distribution outlined in paragraph above is the person or entity which is entitled to receive this Capital Credit distribution. Further, I hereby agree to indemnify and hold MJM Electric Cooperative, Inc. harmless from any and all liability that they might incur as a result of payment of this Capital Credit based upon this affidavit.

Dated this _____ day of _____, _____

Affiant

PRINT NAME

ADDRESS

Please return this form to: MJM Electric Cooperative, Inc.
PO Box 80
Carlinville, IL 62626

