

**AFFIDAVIT BY SURVIVING CHILD OR CHILDREN OF DECEASED MEMBER OF CANOOCHEE
ELECTRIC MEMBERSHIP CORPORATION WHO DIED INTESTATE AND WAS NOT SURVIVED
BY A SPOUSE WHERE CAPITAL CREDITS ARE \$2,500.00 OR LESS**

Personally appeared before the undersigned attesting officer duly authorized by law to administer oaths the undersigned who says on oath the following:
_____ was a member of Canoochee Electric Membership Corporation who died intestate (without a will) on the _____ day of _____, 20____. The member was not survived by a spouse. The child or children surviving the deceased member is/are as follows:

The repayment of the revenues allocated to the deceased member is \$_____, which is \$2,500.00 or less. There has been no administration on the estate of the deceased member. There has been no order obtained that no administration is necessary. Therefore, the surviving child/children is/are entitled to receive the capital credits of the member as provided by Official Code of Georgia Annotated Section 46-3-341(d)(2), pro rata.

This Affidavit is made for the purpose of inducing Canoochee Electric Membership Corporation to pay the capital credits of the deceased member to the person or persons shown herein to be entitled thereto and if the Affiant should give any information hereto under oath that is knowingly false, the Affiant shall be subject to being punished as provided by law.

Payment to the child or children named above shall operate as a complete acquittal and discharge to Canoochee Electric Membership Corporation from any action, claim, or demand of whatever nature for the amounts so paid, by any heir, distributee, or creditor of the deceased member or any other person. Payment of the sum of money indicated to the named recipient(s) is authorized to be made as provided in O.C.G.A. § 46-3-341 without the administration of the estate of the decedent and without the necessity of obtaining an order that no administration is necessary.

Signature

Sworn to and subscribed before me
This _____ day of _____, 20____.

Printed Name of Affiant
Address:

Notary Public
(SEAL)
My Commission Expires:

Telephone:
