

REQUEST FOR EARLY RETIREMENT OF CAPITAL CREDITS

If you are requesting an early retirement of capital credits based on reaching age 75, please complete this form and return to:

Monitor Cooperative Telephone Company
Capital Credits Department
15265 Woodburn Monitor Rd NE
Woodburn, OR 97071

State of _____)
County of _____) ss.

I, _____, hereby request an early
(PLEASE PRINT FULL NAME)
retirement of my present capital credits assigned by Monitor Cooperative Telephone Company.

My current address is: _____, City:
_____ State: _____ Zip _____.

Phone Number: _____ Date of Birth: _____.

Social Security Number: _____.

I certify that:

- 1) I am 75 years old or older and have presented proof of age.
- 2) I am the party legally entitled to claim ownership of these capital credit payments.
- 3) I will agree to save and hold harmless Monitor Cooperative Telephone Company with respect to this disbursement.
- 4) I understand that I will also receive future allocated capital credits in the year made so long as I am a current member of the Company.
- 5) I have provided accurate and current information on this written instrument.

Signature Date

Subscribed and attested before me this _____ day of _____, _____, by
_____.

Notary Public

My Commission Expires

For Cooperative Use Only

Member #: _____ Capital Credits Earned: \$ _____ Years thru: _____ Check #: _____