

**AFFIDAVIT - REQUEST FOR UNCLAIMED ASSETS**

Complete then send to Corn Belt Energy, address is at bottom of the page

**Section 1. - To be filled out by person claiming capital credits.**

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
First MI Last

Street (current address) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship to Decedent \_\_\_\_\_ Phone \_\_\_\_\_

**Section 2. - Claiming Assets from: (Deceased information)**

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
First MI Last

Street (at time of service) \_\_\_\_\_  
(Optional)

City \_\_\_\_\_ State IL. Zip \_\_\_\_\_ Date of Death \_\_\_\_\_

**Section 3. - Agent for Heir.**

If Claimant is acting as an agent of the Holder of Record, complete the following:

I, \_\_\_\_\_, do hereby attest and certify that I am legally authorized agent of the above named former member of Corn Belt Energy Corporation, and empowered to act on his/her behalf to perfect this claim. I do further attest that any assets secured by me as a result of this claim will be distributed to the lawful owners in a timely manner. The undersigned agrees to hold harmless Corn Belt Energy Corporation, from any claims including costs and reasonable attorney fees, which may arise out of the payment of these capital credits to this Affiant.

**Section 4. - Notary Seal**

STATE OF \_\_\_\_\_ )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

X \_\_\_\_\_  
Affiant (person claiming capital credits)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_ My Commission Expires \_\_\_\_\_  
(Notary Public)