



REQUEST FOR UNCLAIMED ASSETS

Claiming Assets of (Name as listed in publication):

Last _____ First _____

Member No. _____ Amount _____

Claimant Requesting Assets:

Name _____ Soc. Sec. No. _____

Street (current address) _____

City _____ State _____ Zip _____

Phone number _____

Relationship to Claimant _____

Method of Refund Requested (check box)

☐ Check issued

☐ Donation to Roundup

☐ Applied to Account No. _____ Name on Account _____

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 stockholder of Citizens Electric 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.

Signature: _____ Date: _____

(Must be notarized if amount is greater than \$100.00 or for any business account)

STATE OF MISSOURI

_____))
_____) ss.
COUNTY OF _____)

On this _____ day of _____, in the year 20____, before me
_____, a Notary Public in and for said state, personally appeared
_____, known to me to be the person who executed the within Claim for Unsecured
Assets, and acknowledged to me that he/she executed the same for the purposes therein stated.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal the day and year first above mentioned.

Notary Public

My Commission Expires: _____

*Please return the completed form to our offices at:

1500 Rand Ave. Perryville, MO 63775 ATTN: Unclaimed Assets or email: citizens@cecmo.com