



CONTINENTAL DIVIDE ELECTRIC COOPERATIVE, INC.

P.O. Box 1087 • Grants, New Mexico 87020 • (505) 285-6656 • Fax (505) 287-2234

P.O. Box 786 • Gallup, New Mexico 87305 • (505) 863-3641 • Fax (505) 863-2175

FOR OFFICE USE ONLY

Date received _____

Processed by _____

Action taken _____

Revised 8/15

Capital Credit Refund and Name Change Request Form (Please print all answers)

1. What is the name you saw **published** in the *enchantment* magazine? Please spell the name below as it was spelled in the *enchantment*:

2. Was the name spelled correctly? yes no If **no**, please enter the correct spelling below:

3. Please provide the **current** mailing address for the name you saw published in the *enchantment* magazine.
Mailing address _____
City _____ State _____ Zip _____
Phone No. _____ E-mail _____
4. Is the name published **you**, a **business you own**, a **relative** or **other**? Please print your answer below:

5. If you answered **relative** or **other** above, what is your **relationship** to this individual or business?

6. If you answered **relative** or **other** above, is this individual deceased? yes no
If individual is deceased, please attach appropriate legal documentation, as proof.
7. If the name you saw is **you** or a **business you own**, are you requesting a **name change** for past and/or future capital credit checks? yes no If you answered yes, state below why (i.e., divorce, marriage, legal name change, business closed, etc.) and attach appropriate legal documentation, as proof:

8. Is there an **additional name** to be added to current/future capital credit checks? yes no
If yes, provide name and attach appropriate legal documentation (marriage/divorce/death certificate or proof of name change), as proof: _____
9. In the space below, write the physical address of the residence(s) and/or commercial building(s) that **received** service from CDEC in **1989**? (*Note: These are the years for which CDEC is currently retiring capital credits. If the name you are providing information for **did not** receive service from CDEC during these years, the name might not be the same individual for whom CDEC has a capital credit disbursement check.*)

10. If you want capital credit check amount(s) **applied** to your account, provide your open account number:

11. If you want to **donate** the capital credits to CDEC's Education Foundation, select option below:
 Apply all future years of retirement Apply only the current year of retirement.