



P.O. Box 530, Muenster, TX 76252-0530

Unclaimed Capital Credit Account Form

MEMBER ACCOUNT INFORMATION	
Member Name: _____	SSN: _____
Member Number: _____	

CLAIMANT INFORMATION	
NAME: _____	SSN: _____
ADDRESS: _____	RELATIONSHIP: _____
CITY: _____ STATE: _____ ZIP: _____	() DAYTIME PHONE, INCLUDE AREA CODE
EMAIL: _____	

Please include a copy of claimant's Driver's License or any official form used for Identification.

FILING STATUS

- _____ Owner of account being claimed
- _____ If you are a TRUSTEE or GUARDIAN to the owner, send copies of current documents establishing guardianship or trust.
- _____ If you are an EXECUTOR or ADMINISTRATOR for the owner's estate, send a copy of the death certificate **AND** letters of administration **OR** Testamentary dated with 90 days of filing claim.
- _____ If you are an OFFICER OF THE ORGANIZATION, send current documents establishing your authority to act for that organization.
- _____ If you are an HEIR to the owner, send a copy of probated will **OR** court order **OR** affidavit of heirship listing heirs and current addresses **AND** a copy of the death certificate of the owner.

EXECUTED THIS _____	DAY OF _____,	20 _____
See Attachment	X _____	X _____
STATE OF _____		
COUNTY OF _____)	Before me, the undersigned authority, on this day personally appeared _____	
Known to me to be the person(s) whose name(s) is/are subscribed to the foregoing instrument and acknowledge to me that (he/she/they) executed the same for the purposes and considerations expressed.		
Given under my and seal of office this _____ of _____, 20_____.		
		_____ Notary Public, _____ County, (State)
SEAL		

Submit original notarized form to: PenTex Energy, P.O. Box 530, Muenster, TX 76252