

**REQUEST FOR REDEMPTION OF EQUITIES
WITH RESPECT TO DECEDENT'S NON-PROBATED ESTATE**

TO: Le Roy Coop
P.O. Box 248
Le Roy, KS 66857

You are hereby requested to redeem and pay Decedent's heir(s) named below the distributive Share* of any and all stock, equities and other Capital credited to Decedent by The Le Roy Cooperative. Affiant hereby acknowledges that said Capital will be redeemed to the heir(s) pursuant to the policy for redemption and payment established by the Board of Directors, and hereby consents to the distributive Share(s)* stated below.

AFFIDAVIT OF HEIRSHIP

State of _____)

ss

County of _____)

_____, of lawful age, being first duly sworn upon his/her oath, deposes and states:

(1) That _____ (name of Decedent) died at _____ (Place of Death) on the _____ day of _____, _____, and that at the time of death Decedent resided at _____, _____, _____ County, state of _____.

(2) The reason I am requesting this is as follows:

(3) I _____ do or _____ do not receive agricultural income from my land such as: rent, cash rent, CRP payments, grain income, hay income, etc.

(4) That Decedent was survived by the following named person(s) who is/are the sole heir(s) who should receive distributive Shares* as follows:

<u>Name and Relationship</u>	<u>Address</u>	<u>Share*</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

(5) That all of the debts of the Decedent have been paid in full, and Affiant agrees to jointly and severally defend, indemnify and hold the Cooperative harmless from any and all claims which may be made to or against said Capital.

(6) That Affiant has read the foregoing Request for Redemption of Equities and that the statements contained therein are, to the best of Affiant's knowledge and belief, true and correct.

Affiant

Subscribed and sworn to before me this ____ day of _____, ____.

Notary Public

My commission expires _____, ____.

*The Cooperative may require that this Affidavit be executed by each Heir.