



CAPITAL CREDIT DONATION FORM

Member Name: _____

Customer Number: _____

By executing below, Member authorizes and directs Medina Electric Cooperative, Inc. (the "Cooperative") to donate any amounts that would otherwise be paid to Member as a refund of any of Member's retired capital credits to the Cooperative fund designated below:

- _____ Cooperative Scholarship Fund
- _____ Cooperative Operation Round Up® Fund

Member may terminate the above authorization at any time upon written notice to the Cooperative. The Cooperative will resume paying any refunds of Member's capital credits scheduled to be paid following the Cooperative's receipt of Member's written notice of termination in accordance with the Cooperative's customary procedures.

Member, on behalf of himself/herself and Member's heirs, representatives, successors, and assigns, hereby waives and releases the Cooperative from any and all claims or liability related to any amounts donated in accordance with the above authorization.

Member acknowledges that, other than the donation authorized above, nothing contained herein is intended to affect Member's rights with respect to Member's capital credits and that Member is only entitled to a refund of capital credits, if at all, if the Cooperative determines to make such refunds in accordance with the Cooperative's customary procedures.

I HAVE READ THE ABOVE CAPITAL CREDIT DONATION FORM, I UNDERSTAND THAT I HAVE GIVEN UP POTENTIAL RIGHTS BY SIGNING IT, AND I HEREBY SIGN IT VOLUNTARILY.

MEMBER:

Signature: _____

_____ Date

Printed Name: _____