




South River Electric Membership Corporation

Your Touchstone Energy® Cooperative 

Unclaimed Property Request Form

Name of Claimant _____

Social Security Number _____

Current Phone Number _____

Current Address

Street _____

City _____ State _____ Zip Code _____

Last Known Address

Street _____

City _____ State _____ Zip Code _____

Service Address

Street _____

City _____ State _____ Zip Code _____

Signature of Claimant(s) _____ Date _____

Affidavit

All claimants to the listed property must sign this claim form below before a notary and have signature(s) notarized. If the claimant is a business entity, this claim must be executed by an officer of the business entity and must include evidence of the officer's position and/or authority to act on behalf of the business entity.

The named claimant(s) hereby certifies that this property presumed abandoned is valid and just, that all statements are true and correct, and that upon payment of this claim, said claimant will indemnify and hold harmless South River Electric Membership Corporation, its officers, and employees, from any other valid claims to said property or from any loss resulting from the payment of this claim. Any person making a fraudulent claim will be subject to criminal prosecution.

State of _____ County of _____, subscribed and sworn to before me this _____ day of _____, _____, Notary Public _____, State of _____ County of _____. My commission expires: _____.