

**DONIPHAN ELECTRIC COOPERATIVE ASSOCIATION, INC.
P O BOX 699 / 530 W JONES ST
TROY, KANSAS 66087
785-985-3523 • 800-699-0810**

I, _____, am no longer living at
_____. Doniphan Electric Cooperative account
number _____. I no longer wish to be responsible for the electric bill. I request that
my name be removed from the account and membership. I understand that any capital credits
accrued on this membership will remain with _____.

Date

Signature