



dba Norvado, Inc.
43705 US Highway 63
PO Box 67
Cable, Wisconsin 54821-0067

Phone: (715) 798-3303
Fax: (715) 798-3044

Date: _____

As personal representative I, _____

request settlement of the capital patronage account for

_____.

Please send me a document specifying the value of the account, and the available settlement options for my approval.

I have enclosed a copy of the **death certificate*** as well as pages of **one** of the following documents showing my legal authority to make this request: **(PLEASE note, a Power of Attorney document does not meet the requirement)**

- Personal representative or executor paperwork, or
- Letter from an attorney, or
- Will

* Surviving spouse need only provide the death certificate.

Signature: _____

Address: _____

Phone #: _____

Relationship to Deceased: _____

Office info: Service order # _____ CTC _____