SANDHILL
TELEPHONE COOPERATIVE

Unclaimed Capital Credit Refund Request Form

Please Return To:
Sandhill Telephone
Capital Credit Refund
PO Box 519
Jefferson. SC 29718

Current Information

*Required Information

First Name*	Middle Name	Last Name*
Business Name		Title
Current Mailing Address*		
City, State*		Zip Code*
Daytime Phone Number*	Email Address	

Your Social Security Number
Employer Identification Number

For Office Use Only
Date Filed
Account Number
Years Claiming
Total Amount Claimed
Check Number Issued

Previous Information (at time of service)

*Required Information

First Name*	Middle Name	Last Name*
Business Name		Title
Previous Mailing Address*		
City, State*		Zip Code*

Submit Claim

Sandhill Telephone Cooperative provides Members an opportunity to identify the possibility of an Unclaimed Capital Credit Refund by searching the provided list on our website at www.shtc.net. If you believe the funds belong to you, please complete the information above and do one of the following:

1.) Bring the completed form, along with a government issued picture ID, to the nearest business office.
2.) Mail the completed, signed form, along with a copy of a government issued picture ID, to the address above.
3.) Submit via email by clicking on the email button at the top of this form, after clicking on the email button also attached a legible scanned copy of a government issued picture ID.

Claim Property

By submitting this form I hereby acknowledge legal or equitable ownership of the funds identified and agree that I will indemnify and hold harmless Sandhill Telephone Cooperative and its subsidiaries from any other valid claim to such unclaimed funds or from any loss resulting from the payment claim.

_____ Signature of Claimant

_____ Witness

_____ Date