

KOOTENAI ELECTRIC COOPERATIVE
MEMBER REQUEST FOR INFORMATION

TO: Kootenai Electric Cooperative, Inc.
2451 West Dakota Ave.
Hayden, Idaho 83835

In accordance with the policies of the Kootenai Electric Cooperative, I hereby submit my request to examine and inspect certain books, records and information of the Cooperative and warrant, represent and certify each of the following statements:

1. I am a member in good standing with the Cooperative. My full name, address, telephone number and member account number appearing on the Cooperative records are as follows:

(Member Name)

(Address) (City) (State) (Zip)

(Telephone Number) (Cooperative Account Number)

2. The specific Cooperative information which I desire to examine and inspect is:

3. The purpose for which I desire to examine and inspect this information is:

4. This examination and inspection is for a purpose reasonably related to the business of the Cooperative.

5. I understand that this request for information may be denied if the information sought to be examined is of such a nature that examination and inspection would:

- A. Violate a person's right to privacy, violate any agreement with third parties, or adversely affect the Cooperative in its negotiations with third parties;
- B. Adversely affect the Cooperative unduly out of proportion to the possible competing interest of the member seeking to examine such information;
- C. Violate the privilege of confidential communication between the Cooperative and its attorney;
- D. If the examination and inspection is not for a legitimate purpose, or is to gratify mere curiosity, or is otherwise inimical to the lawful interest of the Cooperative, or is not reasonably germane to the interest of the member as such; or

E. If the Cooperative information sought to be inspected deals with trade secrets or other information which is privileged, confidential or proprietary.

6. I agree to return said information items upon request.

7. I shall not use the Cooperative information which I examine and inspect for any other purpose other than the purpose specified above.

8. I agree to keep all information confidential and will not disclose the same to any third party except as necessary to comply with a court order or as specifically listed below:

9. I agree to reimburse the Cooperative for the costs of producing and providing the information requested in accordance with Section III. H. of Policy No. 3-6/Member Requests for Cooperative Information. I further agree that any such production and provision of the requested information may be done on the Cooperative's premises, within a time-frame determined by the Cooperative and in a data format acceptable to the Cooperative.

DATED this _____ day of _____, 20_____.

Member Signature

STATE OF IDAHO)
 : ss.
County of Kootenai)

On this _____ day of _____, 20____, before me personally appeared _____, to me known to be the individual described in and who executed the foregoing instrument and acknowledged that (s)he signed and sealed the same as his/her own free and voluntary act and deed, for the uses and purposes therein mentioned.

GIVEN UNDER MY HAND AND OFFICIAL SEAL the day and year in this certificate first written above.

(SEAL)

Notary Public in and for the State of Idaho
Residing At: _____
My Commission Expires: _____

