

SOLOMON, KANSAS 67480 * 201 DAKOTA DRIVE * P.O. BOX 286 * TELEPHONE (785) 655-2011

AFFIRMATION OF DIRECTOR QUALIFICATION

Qualifications to be eligible to become and remain a director are set forth in DSO's bylaws. In addition, statutory and common law imposes certain duties upon directors. The following questions are designed to ensure you are an eligible director candidate. False or misleading statements made on this form are grounds for removing your name from the election process or, if discovered after election, removing you from office.

Address of Primary	y Residence:		
Are you a member	of DSO?	Yes	No
Do you receive ele	ctric service f	from DSO at th	ne above address?
	Yes	No	
1	nsible for and	must actively	participate in the governance of the
cooperative. The I annual basis, you v members, committ Monday of every n	nsible for and DSO board of vill attend app ees, and other nonth at 7:00 mmit that amo	must actively directors is qu proximately 15 organizations p.m. and the n	participate in the governance of the aite active. It is anticipated that, on a to 25 days at meetings of the board s. The board meets regularly on the meeting normally concludes by 9:00 be actively involved in the affairs o

AFFIRMATION AND RELEASE

I have read DSO's bylaws, Section 4.03 Qualification to be Nominated, Elected, and Remain a Director. The statements made by me to the foregoing questions herein are complete and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentation of facts in this document may result in the removal of my name from the election process, or if discovered after election, may result in my removal from office. I authorize the company and /or its agents to verify this information.

Signature

Date

OFFICIAL PETITION FOR DIRECTOR NOMINATION

We, the undersigned members, in good standing of DSO Electric Cooperative, Inc., hereby petition to nominate as candidate for election to the board of directors:

Candidate Name:

 Address:

 Zip:

For this petition to be valid, it must be signed by at least 15 members of DSO. If a membership is jointly held, only one may sign the petition.

	Member Name (Print)	Member Name (Signature)
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		

VERIFICATION

STATE OF KANSAS, COUNTY OF _____,

_____ of lawful age, being duly sworn upon his/her oath, states:

That he/she is the director nominee above named; that he/she has read the above petition; and that the signatures contained in this petition are valid and true.

Signature of Director Nominee