

River Valley Co-op Owner Equity Refund Request

Date: _____ **Phone:** _____
Owner Number: _____ **Email:** _____
Owner Name: _____ **Address:** _____

Termination:

I, _____, the authorized representative of River Valley Co-op ownership number _____, am terminating my ownership with River Valley Co-op as a Co-op Owner.

I request that the cooperative refund the Equity invested in my Member Equity Account totaling \$_____ to me. Please mail my refund check to the address listed above.

Print Name: Representative of Ownership

Signature: Representative of Ownership

Date

Comments:

Article 2 – Membership / 2.6 Termination: Membership may be terminated in the following ways: a) voluntarily by a member upon written notice to the Co-op; (see full Article for b & c). Upon suspension or termination of membership for any reason, member equity payments shall be redeemed in accordance with Article 8 below.

Article 8 – Member Owner's Equity / 8.4 Member-owners' payments:

Any institutional member-owner's equity payments, redemption payments, dividends, or rebates shall be made payable only to the named institutional member-owner. Individual or household member-owner's equity payments, redemption payments, dividends, or rebates shall be made payable only to the named representative of membership and not divided among or paid to household members.

Full bylaws can be found at: <http://rivervalleymarket.coop/about/co-op-bylaws/>

For office use only:

Date request received:

Owner Number:

Name of Representative of Membership on Record:

Date joined:

Date terminated:

Total Equity Invested: \$

Total Equity Refunded: \$

Refund processed by:

Staff Signature / Title

Date

Please Mail Completed Form To:

Attn: Bookkeeper | River Valley Co-op | 330 North King St | Northampton, MA

01061

Checks for Equity Refunds will be processed within two weeks.