

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 Owner 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 Ownership 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 N King St | Northampton, MA 01060

Checks for Equity Refunds will be processed within two weeks.