



**FORM FOR SELLING OF MEMBER'S PAID -UP SHARE CAPITAL
PORTION TO BE FILLED - UP BY MEMBER**

Passbook No. _____	Date of Membership: _____
Name of Member : _____	
Last Name	First Name
Middle Name	
Birthday : _____	
Reason for Sale of Share Capital:	

I hereby affirm that the decision to sell my Paid-Up Share Capital to the Cooperative is my voluntary act.	
Member's Signature : _____	Date Signed: _____
Witnesses:	
_____	_____
SIGNATURE OVER PRINTED NAME	SIGNATURE OVER PRINTED NAME

MEMBER'S SHARE CAPITAL	PhP _____
Paid-Up _____	
MPSC _____	
LESS	
I. MEMBER ACCOUNTABILITIES	
Loan Balance (Principal Amount)	PhP _____
Fines and Surcharges	_____
Payment to Co-Maker of Member	_____
Co-Maker's Deduction	_____
NMSB	_____
Others	
_____	_____
_____	_____
_____	_____
TOTAL ACCOUNTABILITIES	PhP _____
II. REQUIRED SHARE CAPITAL FOR RETENTION *	PHp _____
AMOUNT PAYABLE TO MEMBER	
_____ (PhP _____)	
Amount in Words	

It is understood that member agrees to the following conditions in making this offer to NOVADECI for the repurchase of his/her Share Capital.

1. Member should undergo a required counselling session as part of this program, as scheduled by the Coop.
2. Member should retain the minimum amount of PhP 15,000.00 as his Share Capital.
3. Only the retained Share Capital shall be entitled to Share Protection Benefit.
4. Member may continue to add to his/her Share Capital provided he/she is not yet a Senior Citizen (below 60 years old) at the time of avilment of this program.
5. Member 's standing shall be guided by the existing policy on Member in Good Standing (MIGS)

RECOMMENDATION : _____

RECOMMENDED BY: _____ **CHECKED BY:** _____

NOTED BY : _____ **APPROVED BY:** _____

BRANCH MANAGER - QC **GENERAL MANAGER**