South Yorkshire Community Bank
35 Townhead Street
Sheffield S1 2EB

0114 276 0787
admin@sycb.co.uk
sycb.co.uk

Declining of Interest or Dividend Payment Form

Full name: .....

Member number: .....

Telephone: .....

I hereby confirm that I do not wish for a dividend or interest to be paid on the above membership accounts, and on the following junior accounts on which I am the named trustee.

- Member number .....
- Member number .....
-
- Member number .....
- Member number .....

I confirm that I will inform the Credit Union in writing if I wish this decision to be reversed at any time.

Member's signature ..... Date .....

For office use:

Authorised by: .....

Signed: .....

Date: ..... (change status to s in status 3 and put telegram on)