

CHANGE OF DISBURSEMENT FORM

Member Name: _____

Account No. _____

Date: _____

| Method of Payment (Tick one✓) | |
|---|--|
| Payroll | |
| EFT | |
| Direct Debit | |

| Frequency (Tick one✓) | |
|---------------------------------|--|
| Weekly | |
| Fortnightly | |
| Monthly | |

Disbursement

Shares € _____

Loan/Interest € _____

Family A/c € _____

Access € _____

Legal Fees € _____

| Family a/c info | |
|-----------------|--|
| Shares | |
| Loan | |
| Access | |

Member Signature: _____

Print Name: _____

Staff Signature: _____

Print Name: _____

Amended by: _____