

Date: \_\_\_\_\_ / \_\_\_\_\_ /20\_\_\_\_\_  
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**The Manager**  
**National Co-operative Credit Union Ltd.**  
**Roseau**  
**31-37 Independence Street**  
**Roseau**

Dear Sir/Madam,

Please be informed that as of today, until \_\_\_\_\_ / \_\_\_\_\_ /20\_\_\_\_\_, I  
\_\_\_\_\_ holder of Account No. \_\_\_\_\_  
would like to cancel the authorization given to \_\_\_\_\_ to  
operate my accounts.

Yours truly,

\_\_\_\_\_  
NAME OF MEMBER/ACCOUNT HOLDER

\_\_\_\_\_  
SIGNATURE OF MEMBER/ACCOUNT HOLDER

Witness: \_\_\_\_\_

Witness: \_\_\_\_\_

Checked By: \_\_\_\_\_