

## DECLARATION OF ACCOUNT ACTIVITY

<b>ST. PATRICK'S COOPERATIVE CREDIT UNION LTD.</b>		BRANCH	DATE
NAME OF MEMBER/COMPANY	ACCOUNT NUMBER		RISK RATING
MAILING ADDRESS	TELEPHONE	TELEFAX	RESIDENT STATUS
<p>I declare that the primary source of funding from which account transactions will be generated is/are:</p> <p><input type="checkbox"/> Salary</p> <p><input type="checkbox"/> Pension</p> <p>Other (specify) _____</p>			
<p>I further declare that the anticipated account activity will be \$ _____</p> <p><input type="checkbox"/> Weekly                      <input type="checkbox"/> Monthly</p> <p><input type="checkbox"/> Fortnightly</p>			
MEMBER'S SIGNATURE:		<p>SPCCU policy requires that we assess the information contained in the declaration above before accepting deposits. Consent is given to disclose this information to law enforcement authorities.</p>	
_____			
<p><b>FOR OFFICIAL USE</b></p> <p><input type="checkbox"/> MEMBER REFUSES TO SIGN FORM                      <input type="checkbox"/> ACTIVITY UNREASONABLE FOR BUSINESS</p>			
_____		_____	
TAKEN BY		AUTHORIZING OFFICER	