



# WITHDRAWAL FROM OWNERSHIP

Must be signed and dated by the Member-of-Record in order to be valid.

**ACCOUNT ID**

**OWNER #**

**4200**

Member-of-Record Name (please print)

Mailing Address

City/State/Zip Code

E-mail

Phone

I hereby withdraw from ownership in the Davis Food Co-op, Inc.  
I ask that (check one):

my shares be donated  
to the Co-op.

the Co-op **refund** me the  
shares I invested

**Reason for withdrawal:**

Member-of-Record's Signature

Date

Co-owner's Signature

Date

## OWNERSHIP DEPARTMENT ONLY

\$ \_\_\_\_\_ Received as donation

\$ \_\_\_\_\_ Reimbursed

Initials: \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Check # \_\_\_\_\_