

Reference No.: Requested Date _____

ADVANCES TO MEMBERS AUTHORIZATION FORM

I, ______, a bonafide member of the Public Safety Savings and Loan Association, Inc. (PSSLAI) acknowledge that the PSSLAI may only distribute income to its members once every year pursuant to BSP issued Circular 789. Considering my present financial needs, I would like to avail of the Association's ADVANCE TO MEMBERS facility with the following terms and conditions:

- 1. Advances to Members may be availed of after computation of expected dividend every July of each year and is computed based on the lowest quarterly balance of the capital contribution.
- 2. Advances to Members will be payable/due on the date the dividend is credited every January of each year and payment shall be done by deducting the same from the Annual dividend that the member is entitled to receive from PSSLAI at the end of the fiscal year.
- 3. Advances to Members facility shall be subject to 0% interest per annum.
- 4. In case of account closure/termination of membership before the end of the fiscal year, the amount advanced through this facility shall be deducted from the balance of respective contribution/deposit accounts with PSSLAI.
- 5. Advances to Members form shall only be signed ONCE, and will be applicable for future request of advances of expected dividend until revoked by the member.

Conforme:

Signature over printed name

Member No.	
Mobile/Contact Number	

Client's copy:

This is to acknowledge receipt of the signed AMA form of _____.

Date Received _____

PSSLAI Employee _____