



## SPECIAL CONTRIBUTION REFUND DECLARATION (FOR 20\_\_ )

THIS DECLARATION IS TO BE COMPLETED BY CONTRIBUTORS WHO HAVE LOST EMPLOYMENT AS A RESULT OF COVID -19 AND REMAIN UNEMPLOYED TO DATE

I  of   
FULL NAME ADDRESS

In the parish of  do hereby declare that the information provided herein and in the documents appended hereto is true and correct to the best of my knowledge and belief and nothing has been falsely stated or concealed therein.

I  do solemnly and sincerely declare that:  
FULL NAME

1. I was unemployed for the period  MM/DD/YYYY to  MM/DD/YYYY
2. I have not regained employment;
3. I have been advised and do understand that should this information be false, the Trust reserves the right to reject any request without giving reason for such rejection and shall not be required to verify any information received prior to processing my application.

**PLEASE NOTE: CONTRIBUTION REFUNDS FOR MORTGAGORS WILL BE TRANSFERRED TO THEIR MORTGAGE ACCOUNT(S).**

SIGNED BY THE SAID \_\_\_\_\_  
APPLICANT'S NAME

THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20 \_\_\_\_\_  
DAY MONTH YEAR

\_\_\_\_\_  
APPLICANT'S SIGNATURE

WITNESS'S NAME  JUSTICE OF THE PEACE  NOTARY PUBLIC

\_\_\_\_\_  
WITNESS'S SIGNATURE

