

**OFFICE USE ONLY**

# SHARE REDEMPTION 11

## Application Form

SRS No.	
SC No.:	
SRN.:	
No. of Shares:	
Share Class	

Name

Address

Address

Address

Address

Address

I/We agree to the terms and conditions set out in the Letter of Offer by the Society. I/we confirm that I/we **have obtained independent financial legal and tax advice** prior to the signature of this Share Redemption Form and furthermore that this Share Redemption is being carried out in good faith by Kerry Co-operative Creameries Limited and that on receipt of monies as may be due, such monies shall be in full and final settlement of any claim against Kerry Co-operative Creameries Limited and I/we hereby indemnify Kerry Co-operative Creameries Limited fully against all claims, cost or expenses in this regard. I/We understand that this Share redemption scheme is an Income tax event and all monies from this event shall be subject to Income Tax, PRSI and USC.

Print Shareholder/Joint Shareholders Name(s)	Signature of Shareholders

Shareholder Telephone Number

Amount of shares to redeem

Tax Advisor Name and Telephone number

**Return this form with...**

- the original Share Certificate
- proof of I.D. for each Shareholder
- proof of address for each Shareholder
- Completed bank mandate form
- by 4:00pm, Friday 3rd May 2024, to:

Share Redemption Department, Kerry Co-operative Creameries Limited, FBD House, Fels Point, Dan Spring Road, Tralee, Co. Kerry. V92 RW5W

Telephone: (066) 7128571.

**NO SHARE CERT - NO REDEMPTION**



OFFICE USE ONLY:

<input type="checkbox"/>	I.D.	<input type="checkbox"/>	I.D.
<input type="checkbox"/>	Address	<input type="checkbox"/>	Address
<input type="checkbox"/>	Mandate	<input type="checkbox"/>	Mandate
<input type="checkbox"/>	Checked by:	<input type="checkbox"/>	Checked by:



