

RETURN THIS FORM TO: Service Alberta Consumer Services Division 3rd Floor, 10155 102 Street EDMONTON AB T5J 4L4 Fax No.: (780) 427-3033

## PLEASE PRINT OR TYPE

## 1. Name of Cooperative 2. Alberta Corporate Access Number (as noted on registration documents)

## 3. The Cooperative is: (select <u>one</u>)

(a) dissolving under Section 306(1) and has	no property and no liabilities
(b) dissolving under Section 306(2) and has	property or liabilities, or both

- (c) dissolving under Section 308 and has not 🛄 sent a statement of revocation of intent to dissolve
- 4. If the Cooperative is being dissolved under Section 308 of the Cooperatives Act, the following <u>must</u> be answered:

This Cooperative has complied with Section 309(1) of the Act. Yes No

## 5. Documents and records of the Cooperative shall be kept for six years from the date of dissolution by:

Name (First, Middle Initia	l, Last)			
Business Address	Street	City/Town	Province	Postal Code

Signature of Authorized Person	Title (please PRINT)	Date (mm/dd/yyyy)
Name (please PRINT)	Daytime Telephone Number (include area code)	

This information is being collected for the purposes of corporate registry records in accordance with the Cooperatives Act. Questions about the collection of this information can be directed to the Freedom of Information and Protection of Privacy Coordinator for the Alberta Government, Box 3140, Edmonton, Alberta T5J 2G7, (780) 427-5210.