



U.P. Credit Cooperative
Fernandez Hall
I. Delos Reyes St. corner C.P. Garcia Avenue
U.P. Campus, Diliman, Quezon City
Tel. Nos. 8924-8001-8646-88-62

**BANK DEPOSIT AUTHORIZATION
BENEFIT CLAIM**

This is to authorize the U.P. Credit Cooperative, to deposit my Benefit claims to my bank account:

Mutual Aid Benefit Retirement Benefit Death Assistance Benefit

Account Name: _____

Bank: LANDBANK/ VETERANS BANK/ DBP / PNB CHECK

Account No. _____

I fully understand that I am holding U.P. Credit Cooperative free of liability and or damages that may happen arising from this authorization.

Name _____

Signature : _____

Contact No. _____

Email Address: _____