

APPLICATION FOR WITHDRAWAL OF SPECIFIC DEPOSIT ACCOUNT

NAME : _____ DEPT: _____

REG NO: _____ DATE: _____

PHONE/HP NO: _____

I wish to withdraw \$ _____ from my specific deposit account for
the purpose of _____.

Signature of member

FOR OFFICIAL USE

Amount standing to my credit up to : _____ \$ _____

Approved on: _____

Signed by Chairman: _____