** UNC SACCO LIMITED**

**DEPOSIT WITHDRAWAL FORM**

FIRST NAME…………………………………………………………. SURNAME…………………………………………………………

MAILING ADDRESS……………………………………………. PHONE………………………………………………………………

………………………………………………………………………………

BOOK NUMBER EMPLOYMENT NUMBER EMPLOYER NAME

……………………….. ……………………………………. ……………………………………

**FINANCIAL INFORMATION**

|  |
| --- |
| CURRENT LEDGER BALANCE |
| ORDINARY SAVINGS FIXED DEPOSITS |
| MK……………………………. MK………………………………. |

**WITHDRAW INFORMATION**

|  |
| --- |
| WITHDRAWAL AMOUNT MK………………………………………………… ONLY |
| AMOUNT IN WORDS ………………………………………………………………………………………………………………………. |
| ACCOUNT TYPE……………………………………………………………………………………………………………………………… |

MEMBER SIGNATURE…………………………………………………. DATE……………………………………….

**FOR OFFICIAL USE ONLY**

**PROCESSED BY…………………………………. SIGNATURE…………………………… DATE…………………………….**

**APPROVED BY…………………………………. SIGNATURE………………………… DATE………………………………**