

Savings Withdrawal Form

Account Information	
Account Name:	<input type="text"/>
Account Number:	<input type="text"/>

Withdrawal	
I/we authorise and request the Society to withdraw from my/our account the sum of:	
In figures £	<input type="text"/>
In words	<input type="text"/>
By:	
<input type="checkbox"/> Cheque - made payable to:	<input type="text"/>
<input type="checkbox"/> Cash (maximum £500 per day.Larger amounts of cash up to £2,000 per day require at least 24 hours' notice)	
<input type="checkbox"/> Transfer to my LBS account number:	<input type="text"/>
<input type="checkbox"/> Chaps transfer to my nominated account- please complete CHAPs form on reverse	

Closure	
I/we authorise and request the Society to close my/our account by:	
<input type="checkbox"/> Cheque - made payable to:	<input type="text"/>
<input type="checkbox"/> Cash (maximum £500 per day.Larger amounts of cash up to £2,000 per day require at least 24 hours' notice)	
<input type="checkbox"/> Transfer to my LBS account number:	<input type="text"/>
<input type="checkbox"/> Chaps transfer to my nominated account- please complete CHAPs form on reverse	

Note: Cheques cannot be stopped unless lost or stolen

YOUR ACCOUNT PASSBOOK MUST ACCOMPANY THIS FORM

Signature 1	<input type="text"/>	Date	<input type="text"/>
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Signature 2	<input type="text"/>	Date	<input type="text"/>
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Signature 3	<input type="text"/>	Date	<input type="text"/>
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Signature 4	<input type="text"/>	Date	<input type="text"/>
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