



Withdrawal Form

Please complete form in BLACK INK using CAPITAL letters, and ensure that you sign next to any alterations made.

1 ACCOUNT NUMBER

2 ACCOUNT NAME (IN FULL)

3 WITHDRAWAL DETAILS

Amount of withdrawal \$ Do you wish to close this account? Yes No

4 BANK TRANSFER

A. Transfer to bank account details on file Add as Pre-nominated Account #

B. Transfer to bank, building society or credit union details below: # **Pre-Nominated Account** is an Account you have nominated in writing, and we have approved, for access using withdrawal requests, subject to approval limits.

Bank, building society or credit union name Branch number (BSB) Account / membership number

Account name (in full)

DDH Reference (max. 18 characters) Receiving Account Reference (including Tax Office, if applicable)

Please specify timing:

Overnight

Same day (fee applies); include recipient's residential address:

5 CHEQUE REQUEST

Cheque Bank cheque (a fee applies for bank cheques)

Payee Amount \$

Dispatch method:

Please post to:

will collect from Level 9, 324 Queen St, Brisbane on / /

6 PURPOSE OF PAYMENT

Please specify the purpose of this payment (for example; purchase of property, investment, etc.)

7 SIGNATURES

Signature	Signature
<input type="text"/>	<input type="text"/>
Name	Name
<input type="text"/>	<input type="text"/>
Date	Date
<input type="text"/>	<input type="text"/>

8 CONTACT DETAILS

Name Phone