## **Fund withdrawal**

Please fill in the date and all	the necessary information	clearly on your fund withdrawal request.
Date	:	
Account Number	:	
Name of Account Holder(s)	:	
Bank Account No.	:	
Bank Name	:	
Branch Name	:	
Contact No. (phone)	:	
Amount (Taka)	:	
In words	: Taka	
	by declare that no purch as well as the proportionat	ase will be made against the amount requested for e loan amount.
	, ,	
Signature is verified by N	Ionitorina Officer	Signature of the Accountholder(s)
orginature is vermen by i	iomicoling office.	orginature of the Accountmoduci(5)
	Authorization for che	que collection
I/We hereby authorize Mr. /	Ms	to collect a cheque
amounting Tk	(In words)	On my/our favor
His/Her signature is attested	l below:	
Specimen Signature of Mr. /	Ms	Signature
Attacted by accountholder(s	\ Mr. /Mc	Signatura