

Name

MINING & PETROLEUM SAVINGS & LOAN SOCIETY LIMITED

SCHOOL FEE SAVING (S4) WITHDRAWAL FORM

Employee/Client Number

PO BOX 210, TABUBIL, WESTERN PROVINCE, PNG - TEL: 6499123 OR 6493836 FAX: 6498249

Name of Bank		Branch			Account No	
I am applying for v	withdrawal from	my Schoo	l Fee S	avings Ad	ccount the s	sum of;
						K
PURPOSE OF WITHDRAWAL						
DATE WITHDRAWAL REQUIRED						
DATE WITHDRAWAE REV	QOINED					
SIGNATURE OF APPLICANT				DA	TE	
WITHDRAWALS ALLOWED BETWEEN DECEMBER THROUGH TO MARCH						
OFFICE USE ONLY						
Balance as at :	/ / 20					
Balan	nce K					
Less: Withdrawal Amou	ınt K		_			
Balance After Withdrav	val K					
RECOMMENDATION						
Society Officer						
Supervisor						
LOANS COMMITTEE						
Approve/Defer/Decline						
Processed:				Date		