



Registered under the Credit Union Act 1979 No CU(s) 37
 Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority FRN213597: Details can be found at www.fca.org.uk
 Registered Office: 165 Baillieston Road
 Glasgow G32 0TN
 Tel: 0141 771 1314
 Fax: 0141 771 0012
 Email: info@scottishpolicecu.co.uk

SAVERPLUS ACCOUNT WITHDRAWAL

Name : _____
 Address: _____
 Membership Number: _____ Reg./Payroll Number _____

I wish to withdraw from the above Saverplus account:
**(N.B. Only 4 withdrawals are permitted per year)*

Please note that you must keep a minimum of £5 in your membership account.

I **do/do not wish** (delete as required) a statement of account sent to me.

Please pay into the bank account below:

Bank/Building Society	
Address	
Post Code	

Branch Sort Code

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Name(s) of Account Holder

Bank / Building Society Account Number

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Roll reference number

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SIGNATURE: _____ **Date:** ___ / ___ / ___

OFFICE USE:	Set up by: _____	2 nd Check: _____	SW2 (Web)
Date: _____	Amount withdrawn: £ _____	Batch No: _____	