

## SERVICE WORKER CREDIT UNION

## PARTIAL WITHDRAWAL FORM

To: The Secretary Treasurer, Service Worker Credit Union

l,	EDP/FNPF NO./EMP.NO of	
		ike to request to make a partial
withdraw of \$	from my shares.	
[Please note that a fee withdrawal]	of \$20 will be deducted for	rom your share on each partial
Signature:	Date:	
Office Use Only:		
Savings:	as at	20
Decision of the Secreta	ıry Treasurer:	
APPROVED	NO <sup>-</sup>	ΓAPPROVED
Signature:	Date:	
Payment/Receipt:		
Received the sum of \$_	Signatur	e of Recipient: