

**THE MANAGER
POLICE HOSPITAL CREDIT UNION
CANTONMENTS-ACCRA**

DATE.....

Dear Sir/Madam,

APPLICATION FOR WITHDRAWAL

I..... with account number
with the union will like to request for a partial withdrawal of GR¢
(in words)from
my accout to enable me.....

I hope my request would be granted

Thanks you for your usual cooperation

Yours faithfully,

SIGNATURE:

NAME:

CONTACT:

FOR OFFICIAL USE ONLY:

SCANNED:

SUBMITTED:

CHEQUE NO:

AMOUNT: GH¢:

DATE: