

## Strategic Finance Limited

### Fund Withdrawal Request

To: The Head of Operations/The Portfolio Manager

Account Type:	<input type="text"/>	<input type="text"/>
Account No.:	<input type="text"/>	Client Branch: <input type="text"/>
Name:	<input type="text"/>	
Contact No.:	<input type="text"/>	Res. Phone: <input type="text"/>
Amount in Taka:	<input type="text"/>	
Client Bank Name:	<input type="text"/>	
Bank account No.:	<input type="text"/>	Withdrawal Mode: Cheque <input type="text"/>
Bank Routing No.:	<input type="text"/>	**BEFTN <input type="text"/>

\*For closing an account, please also submit CDBL account closing form (Bye law 7.7.1)

\*\*Bank change may be applicable for BEFTN while necessary.

Reason for withdrawal/Closing account (Please put a tick mark):

Personal Reason       Not Satisfied with the service       Others.....

Principal Applicant

Joint Applicant

#### FOR AUTHORIZATION TO COLLECT CHEQUE (IF ANY):

Please deliver the cheque to my/our authorized person Mr/Ms .....

Attested:

Signature of the authorized person (s)

Signature of the account Holder(s)

*For Official Use Only*

Received and Verified by: \_\_\_\_\_  
(CSO's name and signature)

Signature & Bank account verified by: \_\_\_\_\_  
Approved by: \_\_\_\_\_

Bank Signatory	Bank Signatory

Withdrawal mode:

Received by:

Delivered by: