

FOR DERIVATIVES USE ONLY

WITHDRAWAL REQUEST FORM & PAYMENT VOUCHER

PV NO :

Part A (To Be Completed By Customer)												
Customer Name											NRIC NO (For Individual Client Only)	
Payment For	<input type="checkbox"/> Withdrawal Of Funds By Client				Customer Code							
					FBR Code							
AMOUNT	R M			,				,				
BANKING INSTRUCTION / DETAILS												
<input type="checkbox"/> NOTE : CLIENT'S LETTER OF INSTRUCTION ENCLOSED												
NOTE : NOTICE OF 2 WORKING DAYS IS REQUIRED TO PROCESS YOUR WITHDRAWAL REQUEST.												
Customer Signature :						Date :						

FOR OFFICE USE ONLY

Net Equity Before Withdrawal	RM	
Net Equity After Withdrawal	RM	
Initial Margin	RM	
Excess Fund	RM	
NOTE : LATEST AVAILABLE DAILY ACTIVITY STATEMENT IS ENCLOSED.		

Part B (To be Completed By HOD-OPS)

Approved By		
Name		
Date		

Part C (To Be Completed By Approving Authority)

Approved By		
Name		
Date		

Part D (To Be Completed By OPS)

Signature Verified By		Cheque No	
Name		Date	
Issued By		Checked By	
Date		Date	
Ext No		Cheque Ready On	

Part E (To Be Completed By OPS For Accounting Entries) **Part F (To be Completed By Recipient)**

Posted By		Received By	
Date		Name	
Verified By		Staff ID / NRIC	
Date		Date	