



THE SINGAPORE TEACHERS' CO-OPERATIVE SOCIETY LTD
 150 Changi Road #02-06 Guthrie Building Singapore 419973
 Tel: 64404393 Fax: 64403382

Dear Sir

Application No: BS/

PRE-MATURITY WITHDRAWAL OF BONUS SAVING

I wish to withdraw \$ _____ (dollars _____)

From my Bonus Saving account. I furnish below the necessary particulars.

Name Mr/Mrs/Mdm/Miss _____ Nric No: _____

School _____ School code _____

Home Address _____
 Singapore (_____)

Contact No _____ Email Address _____

- Cease monthly deduction
- To continue monthly deduction
- Transfer to General Saving A/C
- Monthly deduction transfer to GS A/C

- Self-Collection
- By Post* (Only if this form is signed upon submission)
- Deposit into POSB* / DBS* / OCBC* A/C No: _____

(*Please note that we are only able to do a cheque deposit for the above-named banks)

Yours faithfully

 Signature

 Date

FOR OFFICE USE

- A. Bonus Saving 1 : \$ _____ monthly w.e.f. _____
 Bonus Saving 1 : Balance as at (_____): \$ _____
 Bonus Saving 2 : \$ _____ monthly w.e.f. _____
 Bonus Saving 2 : Balance as at (_____): \$ _____

- B. Interest on Bonus Saving
 Bonus Saving 1 deposit period _____
 Interest on Bonus Saving 1 : \$ _____
 Bonus Saving 2 deposit period _____
 Interest on Bonus Saving 2 : \$ _____
 Amount A: \$ _____
 Cheque No _____ B: \$ _____
 on _____ Total approved: \$ _____

 Hon Treasurer

 Internal Auditor

 Signature/Date