



BAHAMA ISLANDS CO-OPERATIVE CREDIT UNION LIMITED (BICCU)

Date Due _____ **2015**
(Allow Up To 2 Business Days After The Date Of Request)

2014 DIVIDENDS & INTEREST WITHDRAWAL REQUEST

DATE: _____ **2015**

A/C # _____

NAME OF APPLICANT: _____
(PLEASE PRINT)

INTEREST (\$ _____ **)**

DIVIDENDS (\$ _____ **)**

TOTAL \$ _____



Direct Transfer Info:

SAVINGS CHEQUING
Circle Bank Account Type

Bank's Name & Branch

Your Account Number

Name on Account (If Other Than Member)

Transfer To My BICCU Visa Debit Card

SIGNATURE: _____

*******DO NOT WRITE BELOW THIS LINE*******

DATE POSTED: _____

CHEQUE: # _____

POSTED BY: _____