



## SAVING WITHDRAWAL APPLICATION CUM RECIEPT

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Account No. \_\_\_\_\_ Monthly Saving Rs. \_\_\_\_\_

Date: \_\_\_\_\_

To  
The Secretary  
MWS HAKIMI QARZAN HASANA TRUST  
Fida mansion, 4 Bibijan Street,  
Mumbai- 400 003

I/We request you to allow me/us to withdraw Rs. \_\_\_\_\_ From my/ our Saving account  
lying Balance of Rs. \_\_\_\_\_ With yur Trust, as on Date \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

### RECIEPT

I/We have received from MWS HAKIMI QARZAN HASANA TRUST THE SUM OF Rs. \_\_\_\_\_

Rupees (in words) \_\_\_\_\_

by Cheque No. \_\_\_\_\_ Date \_\_\_\_\_ drawn on the Bank of Baroda Crawford Market  
Branch towards withdrawals of my/ our savings.

Revenue  
Stamp

### FOR OFFICE USE

| Last Year<br>Balance | Current Year<br>Saving | Saving<br>Withdrawls | Net Saving<br>Amount | K.H.Balance |     | Guarantor to<br>for |
|----------------------|------------------------|----------------------|----------------------|-------------|-----|---------------------|
|                      |                        |                      |                      | Loan No.    | Rs. |                     |
| Rs. _____            | Rs. _____              | Rs. _____            | Rs. _____            |             |     | Rs. _____           |
|                      |                        |                      |                      |             |     |                     |
|                      |                        |                      |                      |             |     |                     |

Sanctioned Rs. \_\_\_\_\_ Accepted/Rejected

OFFICE INCHARGE

REMARKS

\*\*\*\*Note: (1) In case of Account Close Letter from Account Holder is Required

(2) This Application must be submitted along with Saving Passbook.

\_\_\_\_\_  
HON. SECRETARY