



RMT Credit Union Ltd

RMT Credit Union Ltd
Finance Office
Unity House
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London NW1 1JD
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E-mail: c.union@rmt.org.uk

Share Withdrawal Form

Credit Union Number: _____

Members Name: _____

Address: _____

Amount to be withdrawn _____ **Signature** _____

Date: _____

Payment method: BACS

Enter Bank details:

Bank: _____

Sort Code: _____ - _____ - _____

Account Number: _____

Office Use only

Share account balance: _____ at (date) _____

Loan Balance: _____

Checked By (signature) _____