FEDERAL ROAD SAFETY CORPS SULEJA STAFF COOPERATIVE THRIFT AND LOAN SOCIETY (FSS-CTLS)

CONTRIBUTION PART-WITHDRAWAL FORM

NAME: ……

PIN: …… **RANK:** ……

COMMAND: …… **Phone NO:** ……

BANK: …… **ACCOUNT NO:** ……

CURRENT MONTHLY CONTRIBUTION (₦): ……

CURRENT TOTAL CONTRIBUTION (₦) (If known): ……

REQUEST AMOUNT TO WITHDRAW (₦): ……

* I confirm that I have provided the above information and accept the terms and conditions governing FSS-CTLS contribution part-withdrawals:

Signature: …… **Date:** ……

FOR OFFICIAL USE ONLY:

Financial Secretary:

Total contribution:…… Outstanding Loan:……

Recommendations: …… Sign/Date:……

President:

Remarks:……

Amount approved:…… Sign/Date:……

Pay a non-refundable fee of ₦1,000 into FSS-CTLS First Bank Account 2041556018 and attach evidence