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**SFIL Securities Limited**  
 Century Centre, Level-8 (Right Side)  
 Kha 225, Bir Uttam Rafiqul Islam Avenue  
 Progoti Shoroni, Dhaka 1212

**FUND WITHDRAWAL REQUEST FORM**

**Name of Principal Account** .....

**Holder:** .....

**Name of Joint Account** .....

**Holder:** .....

**Client Code:** .....

**BO ID:** .....

**Cell No.:** ..... **Email ID:** .....

**Amount Requested for (in Figure):**

BDT. ....

Maximum

**(in words):** Taka .....

.....

**Withdrawal Mode:**

**BEFTN** (Registered Bank Account in the BOAccount)

**Bank Cheque** (as applied through official form)

Thanking You,

\_\_\_\_\_  
Signature of the Principal Account Holder

\_\_\_\_\_  
Signature of the Joint Account Holder

Office use only	
..... (Signature)	
Verifying Official Details:	
(Name)	(Signature verified seal)

Maker	Checker	Signatory	Signatory