

**FUNDS WITHDRAWAL REQUEST**

Date \_\_\_\_\_

Kindly arrange to pay an amount of US \$ \_\_\_\_\_ (Equivalent to AED)

Against balance of Account No. \_\_\_\_\_

Titled \_\_\_\_\_

To the following bank account:

Bank Name \_\_\_\_\_

Bank Branch \_\_\_\_\_

Account # \_\_\_\_\_

Currency of Account \_\_\_\_\_

Title of Account \_\_\_\_\_

IBAN \_\_\_\_\_

*Please Remark:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**Official use:**

**Signature Verification Finance Department:**

\_\_\_\_\_

Payment Reference: \_\_\_\_\_

Date \_\_\_\_\_

GOLD FUND JEWELRY L.L.C