## Databank I No. 61 Barnes Road, Adabraka, PMB, Ministries Post Office, Accra I Tel: 0302 610 610 I Email: clientservices@databankgroup.com

<b>Databank</b> Leadership		MUTUAL FUND WITHDRAWAL FORM  DATABANK BRANCH		
ACCOUNT TYPE				
Single Joint ITF In	Databa nstitutional	ank account number		
PERSONAL DETAILS				
Name on Databank account				
Postal address				
Email address		Phone numb	per	
INVESTMENT TYPE				
INVESTMENT TYPE				
Epack MFund	BFund	ArkFund	EdlFund Tier 1	EdlFund Tier 2
WITHDRAWAL DETAILS				
Withdrawal amount (In figures)	Withdrawal amount (In words)			
Reason for withdrawal				
Educational Business	Real estate	Health 0	Other	
Transfer to other Databank Fund (Indicate Fu	und and account number)			
PAYMENT OPTION (please s		ent option)		
COLLECTION AT BANK USING TOKEN- Up to GHC 5,000 CHEQUE - Indicate payee (attracts a fee of GHC 5)				
(Indicate name on ID card)				
Calcada a Haraffara basalan 🗆 arranga a sangaran sangaran				
Select collection bank: GTBank Zen  (Please note that the name you indicate above is wh	nith Bank oat will be issued on the cheque or used	by the bank for verification	on. Name must match valid ID. Ch	reques above GHC 5,000.00
cannot be collected over the counter.)				
BANK TRANSFER (Account must be in your name on account	name. No third-party transfers allo	wea.) Account number		
Bank		Branch name		
MOBILE MONEY (MTN numbers ONLY) - Up to GHC 2,500  Name on mobile money wallet  Number on mobile money wallet				
Name of mobile money water			Number on mobi	le money wanet
In demonstration of a supervisor dem	a name of County and Databasely an	-i		limited to less of success the success
<b>Indemnity form :</b> I hereby indemnify the above providing wrong Current Account or mobile m				
Signature		_		
FIRST APPLICANT		SECOND APPL	ICANT	
Photo ID: ☐ Passport ☐ Voter's ID Photo ID: ☐ Passport ☐ Voter's ID				
□ National ID □ Driver's license Other			tional ID Driver's licer	nse Other
ID Number:				
Signature / Thumbprint		Signature / Thumb	print	
Date of request/		Date of request		
OFFICIAL USE ONLY				
Name of reviewer Signature	Verified by I	DAMSEL B/O	Signature	Proceeds due date