



# WITHDRAWAL REQUEST

## INVESTMENT DETAILS

Name of Investment: \_\_\_\_\_

Investment No.: \_\_\_\_\_ Maturity Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Withdrawal Amount: \$ \_\_\_\_\_

## BANK ACCOUNT

Bank Account: BSB: \_\_\_ - \_\_\_ Account No.: \_\_\_\_\_  
(Deposit to be made)

Account Name: \_\_\_\_\_

\*Signature: \_\_\_\_\_ \*Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

\*Please note Form must be signed by both investors if held in joint names (in accordance with original application)

Please return this completed form to:

**ANGAS PRIME:**  
**GPO BOX 2948**  
**ADELAIDE SA 5001**

**ANGAS PRIME:**  
**PO BOX 1602**  
**SUBIACO WA 6904**