Transaction Request

Please complete the appropriate details below, sign and date, then forward to the Society's Principal Office.

Scarborough Direct Account No.: ☐☐☐☐☐☐☐☐☐ Account Holder(s): _____

I/We wish to (please tick the appropriate box and enter the amount where applicable):

☐ Invest: £ _____ (Please PRINT your account number on the reverse of all cheques)

☐ (i) withdraw: £ _____ or (ii) to ☐ close either ☐ after notice period** or ☐ immediately subject to a loss of interest** on the amount withdrawn

Please tick one of the following options about how you would like to receive your funds:

☐ Cheque – drawn and returned to account holder(s)

☐ BACS – to be sent directly to your nominated bank account detailed below:

Account Holder's Name: _____ Account number: ☐☐☐☐☐☐☐☐ Sort code: ☐☐ ☐☐ ☐☐

Account Reference: _____

**Your withdrawal will be carried out in accordance with the Terms and Conditions of your account.

Signature(s)

1. _____ 2. _____ Date: _____

CHANGE OF ADDRESS

Note: Please notify any change of address by ticking this box and writing your new address and telephone number on the reverse of this slip ☐.
Please ensure you provide your signature(s) as verification of this request.

If you are a customer of Skipton Financial Services Ltd please tick this box ☐. We will then pass this information to them.