

**SAVINGS ACCOUNT WITHDRAWAL REQUEST**



**IN U.M. Loan & Savings Ministry, Inc.**  
8401 Fishers Center Drive • Fishers, IN 46038-2318  
317.788.7879 • 877.391.8811 • www.umls.org

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

Acct. # \_\_\_\_\_ Name on Account: \_\_\_\_\_

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

Amount to withdraw \_\_\_\_\_ Dollars \$ \_\_\_\_\_ Dollars Cents  
(Write amount in words)

I hereby certify that all persons in whose name this account stands are now living.

Signature(s): \_\_\_\_\_

Keep this copy for your records.

Print Name: \_\_\_\_\_



**SAVINGS ACCOUNT WITHDRAWAL REQUEST**



**IN U.M. Loan & Savings Ministry, Inc.**  
8401 Fishers Center Drive • Fishers, IN 46038-2318  
317.788.7879 • 877.391.8811 • www.umls.org

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

Acct. # \_\_\_\_\_ Name on Account: \_\_\_\_\_

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

Amount to withdraw \_\_\_\_\_ Dollars \$ \_\_\_\_\_ Dollars Cents  
(Write amount in words)

I hereby certify that all persons in whose name this account stands are now living.

Signature(s): \_\_\_\_\_

Return this copy to the office.  
**OFFICE COPY**

Print Name: \_\_\_\_\_

**SAVINGS ACCOUNT WITHDRAWAL REQUEST**



**IN U.M. Loan & Savings Ministry, Inc.**  
8401 Fishers Center Drive • Fishers, IN 46038-2318  
317.788.7879 • 877.391.8811 • www.umls.org

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

Acct. # \_\_\_\_\_ Name on Account: \_\_\_\_\_

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

Amount to withdraw \_\_\_\_\_ Dollars \$ \_\_\_\_\_ Dollars Cents  
(Write amount in words)

I hereby certify that all persons in whose name this account stands are now living.

Signature(s): \_\_\_\_\_

Return this copy to the office.  
**CUSTOMER COPY, returned with check.**

Print Name: \_\_\_\_\_