

Share to Loan Transfer Application

Send or bring this form to the Credit Union Office,
38 Brook Street, Hull, HU2 8LA

Member Number
Mr/Mrs/Miss/Ms
Surname
First Name
Home address
Postcode
Daytime telephone number <i>(Useful if we have a query)</i>
I wish to pay off my Loan in FULL (including any outstanding interest) by transferring funds from my Share Account.
Signature
Date

For Office Use
Date request received
Share balance £ as at
Loan balance £ as at
Authorised by
Date ledger updated

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