



PLDT EMPLOYEES CREDIT COOPERATIVE (PECCI)

Withdrawal Slip

Date : _____

Withdrawal Slip No. _____

- CASH
- CHECK
- ATM
- Other Instruction/s : _____

Depositor's Name

ID No. _____

LAST NAME FIRST NAME M.I.

PLDT Non-Payroll

Others : _____

PESOS : _____
(Amount in words)

Signature : _____

PHP : _____
(Amount in figures)

WITHDRAWAL THROUGH REPRESENTATIVE

(Please attach copy of ID of Depositor and Representative)

I hereby authorize my representative whose signature appears below to make this withdrawal on my behalf.

Signature of Depositor

Signature of Representative

Printed Name

To be accomplished by PECCI personnel

Bal. S/D: PHP _____

As of _____

Evaluated by : _____

Posted by : _____

Paid by : _____

Payment received by : _____

Date : _____