



## Laborie Co-operative Credit Union Ltd.

Allan Louisy Street, Laborie | New Dock Road, Vieux Fort | Bridge Street, Castries

Call: +1 (758) 459-6900 | Email: [info@mylaboriecu.com](mailto:info@mylaboriecu.com)

# Transfer Request Form

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

## Laborie Credit Union Account Details

Members Full Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

NIC Number: \_\_\_\_\_ ID Type: \_\_\_\_\_ ID Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

## Bank Account Details

Name of Bank: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

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

Type of Account:  Savings  Chequing  Loan  Credit Card

Amount: \_\_\_\_\_

I agree to the processing fee of \$5.00

Member's Signature Here: \_\_\_\_\_

Do Not Write Below This Line. For Internal Use Only

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Received By: \_\_\_\_\_

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

Processed By: \_\_\_\_\_

Verification (At least two must be compliant):

- Email
- Phone Number
- NIC Number
- ID Type & Number

Routing Number: \_\_\_\_\_

Entered By: \_\_\_\_\_

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