



# BIZARRE BUSINESS CORPORATION LTD.

KALOOR, KOCHI - 17

## WITHDRAWAL FORM

Affix stamp size photograph

User Name:  Name: ..... Age:

1  Father's Name:.....

\*2  House Name:.....

\*3  Post Office:..... Pin:

\*4  District:..... State:.....

\*5  Phone:  Mob:

\*Write the usernames for more than one unit of shares only if the name and address are the same.

Introducer's Name: ..... Mob:

Biz Captain's Name: ..... Mob:

### DETAILS OF PAYMENT

Payment Details of the Discount Vouchers	Payment Details of the Shares
Date:	Date:
Amount:	Amount:
Franchisee Name / DD No. (With Bank & Branch) / Co. A/c No.	Franchisee Name / DD No. (With Bank & Branch) / Co. A/c No.

### DETAILS OF BENEFIT AVAILED

Gross Commission	Incentive	Discount Availed on used Discount Vouchers

### DETAILS OF COMPLAINT FILED, IF ANY

Police Station	Crime Number

**Declaration:** I hereby declare that the above given particulars are true to the best of my knowledge and belief.

Place: \_\_\_\_\_ Signature:

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

Note: Attach copy of Receipt, Share Certificate, Discount Voucher and Photo Id Proof.