

# Loan Advance Request



St. George Bank Limited ABN 92 055 513 070 AFS Licence No. 240997

**Complete this form to withdraw funds from your St. George Margin Loan.  
If you have any questions please contact an Account Manager on 1300 304 065.**

## Borrower's Details

Name of borrower(s) on the St. George Margin Lending Facility

Borrower(s) Client Reference Number

## Loan Advance Details

Amount of advance

\$

Pay to account – *give details below*

Name of financial institution

Branch name

BSB number

Account number

Account name

Pay to cheque – *give details below*

Name of payee

Address

Postcode

## Declaration

I/We confirm that the above details are true and correct and request you to withdraw funds from my/our St. George Margin Loan.

Borrower(s) signature 1

Borrower(s) signature 2

Date

Date

All loan advance requests must be received by 11am (EST) for funds to be available the following day.

**Please send the completed form to:  
St. George Margin Lending  
Reply Paid 1467  
Royal Exchange NSW 1224  
or fax to 61 2 9236 3093**