For Works Auditor or Office Manager

## EMPLOYES SAVINGS WITHDRAWAL FORM

INTERNATIONAL HARVESTER COMPANY Employes Savings Plan Division 180 N. Michigan Ave., Chicago, Ill.		Date	5-11-48
	Kirk Richard, M, Employes Name—Type or Print		
	Works or Branch	Works Ck. No.	Social Security No.
	Coal mines	1086	
I hereby request you to send to me Savings Account.	e the amount or bonds as	indicated belo	w and charge same to m
☐ Maturity value War Savings Bonds: \$ ☐ Deliver all Bonds on Deposit ☐ Deliver all Future Purchases ☐ Close Out Entire Account including Cash	Deductions from Pay Roll not reported to Treasury Dept. (to be used for complete withdrawals only)		
Will Deductions be Continued? Is this Account New since last Pay Roll was reported? Approved:	Amount Month  Signature of Employe  Home Address		
at seture			

LEAVE BLANK

Check

City

Cost

State