



**TIP** Friendly Society

**Head Office:** 80 Half-Way-Tree Road  
Kingston 10, Jamaica  
Tel: 876-929-1710; 876-618-1914  
E-mail: [mktgsales@tipfriendly.com](mailto:mktgsales@tipfriendly.com)

Shop F4, Caledonia Mall  
Mandeville, Manchester  
Mobile: 876-877-5268  
E-mail: [tjpmville@tipfriendly.com](mailto:tjpmville@tipfriendly.com)

The Annex, Shop # 27A Fairview,  
Montego Bay, St. James  
Mobile: 876-382-7289  
E-mail: [tjpmobay@tipfriendly.com](mailto:tjpmobay@tipfriendly.com)

Shop 8,Ocho Rios Commercial Centre,  
Ocean Village Shopping Centre, Main  
St., Ocho Rios, St. Ann  
Mobile: 876-877-5267  
E-mail: [tjporios@tipfriendly.com](mailto:tjporios@tipfriendly.com)

## ONLINE WITHDRAWAL REQUEST

Please provide additional evidence of your banking details

I hereby authorize *TIP Friendly Society* to deduct funds from my *TIP* account and remit to my Commercial Bank account.

Member Name: \_\_\_\_\_  
First Name Middle Initial(s) Last Name Maiden Name (if applicable)

Member Address: \_\_\_\_\_

TRN: \_\_\_\_\_

Place of work: \_\_\_\_\_

Amount being withdrawn: \_\_\_\_\_

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

Account Number: \_\_\_\_\_ Branch/Transit Number: \_\_\_\_\_

Type of Account:  Savings  Current  Other: \_\_\_\_\_

I have completed and submitted the TIP Indemnity Form for online transactions

I have attached my government-issued ID

I have attached evidence of my banking details

Contact Number (TIP Member): \_\_\_\_\_ Email Address: \_\_\_\_\_

I acknowledge that if the information presented is erroneous, I will pay administrative fees of \$1,000.00 to have the matter resolved and corrected.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date