



## TFSA SAVINGS ACCOUNT WITHDRAWAL REQUEST FORM

ACCOUNT NUMBER: \_\_\_\_\_

ACCOUNT HOLDER NAME: \_\_\_\_\_

ACCOUNT HOLDER S.I.N.#: \_\_\_\_\_

DATE REQUESTED: \_\_\_\_\_

REQUESTED AMOUNT: \_\_\_\_\_

ALL CHEQUES WILL BE ISSUED IN THE NAME OF THE ACCOUNT  
HOLDERS AND FORWARDED AS INDICATED BELOW:

FORWARD FUNDS DIRECTLY TO CLIENT

FORWARD FUNDS DIRECTLY TO AGENT

AGENT'S NUMBER: \_\_\_\_\_

AGENT'S ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PURCHASE TFSA GIC (*TFSA Application must be attached*)

\_\_\_\_\_  
ACCOUNT HOLDER'S SIGNATURE

\_\_\_\_\_  
DATE