



ELECTRONIC GIVING @ THE POINTE

To enroll in Electronic Funds Transfer (EFT), please complete this form and mail with a voided check or deposit slip to:

The Pointe
P.O. Box 4818
Albany, Georgia 31706-4818
Attn: Anna Miller

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone #: _____ E-Mail: _____

Select one of the following:

- New enrollment Cancel Enrollment
 Change in Amount Change in Account Number Change in Draft Frequency

*Effective Date to start, change or cancel: _____

Please select frequency and amount of transfers:

- 5th of every month or next business day in the amount of \$ _____
 Every Friday on a weekly basis in the amount of \$ _____

Account Information:

Please initiate an electronic debit for my offering gift directly from my:

- Checking Account (attach voided check or deposit slip)
 Savings Account (attach a deposit slip)

Account # _____ Routing # _____

Authorization:

I authorize The Pointe to process debit entries from my account as indicated herein. This authority will remain in effect until I give written notification to cancel this authorization. I will allow The Pointe and the Depository a reasonable amount of time to act upon my request.

Authorization Signature: _____

*All gifts are tax-deductible.

*This is a free transaction for you and The Pointe.

*If you have questions, contact Anna Miller at 229-435-5551 ext. 305 or anna@thepointega.com.