**ATM /DEBIT**
**CARD/PIN REORDER REQUEST**
**(PLEASE PRINT LEGIBLY)**

NAME_____ACCOUNT_____TODAY'S DATE_____

DEBIT# 431678000_____ ACCT BALANCE_____
ATM # 581910000_____

NUMBER OF OWNERS_____

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**PLEASE ORDER THE FOLLOWING:**

1. One ATM Card w/ Pin 6.50_____
2. Two ATM Cards w/ Pin 9.00_____
3. One DEBIT Card 5.00_____
4. Two DEBIT Cards 10.00_____

**Reason for Reordering** _____

HAS CARD BEEN DESTROYED BY EMPLOYEE: YES_____
NO_____
ATM SEQUENCE # _____ DEBIT CARD #_____
EMPLOYEE INITIAL _____

**PLEASE FAX ORDERS TO:**
ATM\Debit Card (912) 368-6004

**ONLY ONE CARD PER MEMBER ON ACCOUNT**

**Name to be printed on the card** _____
**Or pin order**
_____

Please mail card/pin to: _____

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**I understand the funds must be available at the time of order and the fees will be deducted from my account. The usual delivery time is two to three weeks. If card is not lost or stolen, old cards must be turned in when ordering.**

**For DEBIT CARD Orders and Re Orders please specify which account you wish the fee's to be taken from: *(Savings)* or *(Checking)* if funds are not sufficient at the time the order is being processed or instructions are not clear the default account will be the SAVINGS account.**

**Signature**_____ **Date**_____

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Employee_____ Branch_____