

1 GENERAL INFORMATION

Print Owner Name	Date of Birth	Social Security Number/TIN
Print Co-Owner Name	Date of Birth	Social Security Number/TIN

2 REDEMPTION INSTRUCTIONS

A penalty of 2% of the principal amount will be imposed for early redemptions. Your investment certificate may be closed if the redemption brings the balance below the required minimum.

Investment Number	Redemption Amount
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3 PAYMENT METHOD

Select one. Wires less than \$20,000 will be assessed a \$20 fee. Requests made after 10:00 am will be processed the next business day. Allow up to two (2) business days for funds to post to your bank account.

OUTGOING PAYMENT

- Electronic Funds Transfer (Complete authorization below.)
- Wire Transfer (Complete authorization below.)

INTERNAL TRANSFER

- Pay off 403(b) Loan # _____
- Planned Giving Account # _____

4 AUTHORIZATION AGREEMENT

This will authorize AGFinancial to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to the bank account indicated below for any payments, interest, withdrawals, redemptions or otherwise, due to you or requested by you on the investment. This authorization is to remain in force until AGFinancial has received written notice of its termination in such time and in such manner as to afford it and your bank a reasonable opportunity to act on it. This authorization does not change the terms of your investment.

This will authorize the bank below, to debit and/or credit the same to the investment.

- Use **existing** EFT instructions on file.

Name(s) As They Appear On Your Bank Account	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
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Bank Account Number	Bank ABA Number (Located in bottom left corner of check.)
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Bank Name (Please print)

5 SIGNATURE(S)

Owner Signature	Date
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Co-Owner Signature	Date
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