



**GEORGIA STATE PLEDGING POOL
PUBLIC DEPOSITOR WITHDRAWAL FORM**

The undersigned Public Depositor elects to withdraw its deposits from a pool of pledged securities that has been established and maintained by

Name of Depository Institution: _____

in accordance with OCGA 45-8-13 through 45-8-13.1 and further will secure its deposits using the dedicated method in accordance with OCGA 45-8-13.

Public Depositor Name: _____

Print Name and Title: _____

Signature: _____ Date: _____

Tax ID Number: _____

Depository Institution: _____

Print Name and Title: _____

Signature: _____ Date: _____

Depository Institution retain a copy for your files.

Email signed copy to GBA at pledgingpool@gabankers.com