

Please complete the form below and drop it off or mail it to your nearest branch location.

FBOG Program Supporter Account Form

In order for your account to be eligible for the Charitable Checking Program, you must establish a "Charity Checking" account with FBOG.

Accountholder(s) Name: _____

Address: _____

Recipient Organization Name: _____ FBOGP #: _____

Charitable Checking Account numbers to be included in FBOG Program to benefit above named organization¹:

Authorized Signer: _____ Date: _____

Employee Name: _____ Date: _____

¹Account holder is not required to sign the Member Termination Form when the recipient organization above no longer participates in the FBOG Program.